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The Supplemental Security Income Program for the Aged, Blind, and Disabled

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Characteristics of State Assistance Programs for SSI Recipients
January 1985

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FOREWORD

Federal supplemental security income (SSI) payments provide a basic level of assistance to this nation's needy aged, blind, and disabled citizens. Each State may provide additional assistance payments to complement the Federal SSI payment to the extent it finds appropriate. These additional State payments are called optional supplementation.

This report provides data on selected characteristics of State optional supplementation programs as of January 1, 1985. It consolidates the former annual report entitled, "Supplemental Security Income for the Aged, Blind, and Disabled, Summary of State Payment Levels, State Supplementation, and Medicaid Decisions," and the biennial report entitled The Supplemental Security Income Program for the Aged, Blind, and Disabled: Selected Characteristics of State Supplementation Programs.

This report summarizes for both the federally administered and State-administered programs, State decisions on eligibility provisions, monthly payment levels (combined Federal and State, and State supplementary levels), State assistance programs for special needs, and State Medicaid decisions.

Rhoda M. G. Davis
Associate Commissioner
Office of Supplemental Security Income

April 1985

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Definition of Terms Used in Tabular Summaries

The characteristics of State supplementation programs are described in terms of the data elements defined below.

A. Optional State Supplementation

A State provides an optional supplement to help persons meet needs not fully covered by Federal SSI payments. The State determines whether it will make a payment, to whom, and in what amount. These supplements, paid on a regular monthly basis, are intended to cover such items as food, shelter, clothing, utilities, and other daily necessities. Some States provide optional supplementary payments to all persons qualifying for SSI benefits, while others may limit them to certain SSI recipients such as the blind or residents of domiciliary-care facilities, or may extend them to persons who would be eligible for SSI except for excess income.

1. Statutory basis for payment--The State laws authorizing supplemental payments are specified.

2. Effective date--Date when the State instituted its optional supplementation program.

3. Administration--The governmental unit responsible for administering these payments is indicated. The unit may be either a State or local agency or the SSA. Under State administration, the State must absorb both program benefit and administrative costs. Under Federal administration, the State is responsible for the program benefit costs only; the Federal government assumes responsibility for the administrative costs.

4. Passalong--In order to be eligible for Medicaid reimbursement, any State making supplementary payments after June 30, 1977, must continue making payments and must pass along the cost-of-living increase to the Federal benefit rate (FBR).

   Two methods are available to insure that cost-of-living increases are passed on to the recipients: the total expenditures method and the payment levels method. Under the total expenditures method, State expenditures for supplementary payments in the current calendar year must at least equal expenditures in the proceeding calendar year. If expenditures are less in the current year (shortfall), the State must increase expenditures in the next calendar year by an amount at least equal to the shortfall.

   Under the payment levels method, States must maintain their supplemental payments at the levels in effect in March 1983 or March 1983 as adjusted. For States electing to at least maintain their March 1983 supplementation levels, the combined payment levels (FBR plus State supplement) were increased by at least the entire July 1, 1983, increase in the FBR. For States electing the March 1983 as adjusted rates, the combined payment levels were increased by at least that portion of the July 1, 1983, FBR increase that was attributable to an increase in the cost of living (3.5 percent). As a result, States' supplemental levels could be decreased by that portion of the increase in the FBR that was not passed on.

5. Scope of coverage--The categories of persons the State has elected to supplement are described. States with State-administered programs establish their own eligibility conditions. States with federally administered programs must adhere to SSI eligibility criteria in all aspects except that they may establish additional income disregards.

6. Recoveries, liens, and assignments--Entries indicate the provisions of State supplementation plans governing recovery of assistance payments and assumption of a recipient's property by the agency.

A State may require as a condition of providing assistance that a lien be placed on a recipient's property. Such a requirement does not affect a person's eligibility or payment status for Federal SSI benefits or federally administered State supplementary payments.

7. Relative responsibility--The State supplementation provisions which govern the responsibility of relatives for providing economic support and returning overpayments are indicated.

8. Supplementation level--Both the maximum State supplemental payments and the combined maximum SSI and State payments which can be awarded to recipients without countable income are presented according to the State designated living arrangements. The Federal benefit rates which are included in the combined payment levels became effective January 1985 and are given below:

	Individual	Couple
Living independently	$325.00	$488.00
(One-third reduction) 1/	216.67	325.34
In title XIX facility	25.00	—
Essential person increment 2/	163.00	—

1/ The value of the reduction (VTR) used to decrease the Federal benefit rate (amount for living independently) if the recipient lives in another person's household for a full calendar month and receives both food and shelter from that person.

2/ The additional amount included in a recipient's check to cover the needs of a household member who provides essential care and services to the recipient and whose needs were previously taken into account in determining the recipient's assistance payment under a State plan approved by title I, X, XIV, or XVI of the Social Security Act.

9. Income disregards--Not all income is counted. The type and amount of income disregarded in determining a recipient's State supplementary payment is indicated. States with State-administered programs can establish their own income exclusions. States that elect Federal administration must either accept the SSI income disregards or disregard additional amounts.

Under the Federal program, $20 of earned or unearned income may be excluded per month. Additionally, $65 per month of earned income plus one-half of the earnings above $65 are disregarded. Home energy and support and maintenance assistance received during 1985 is excluded from income if it is based on need and furnished in an appropriate form (cash/in-kind) by a State certified provider. Countable income is deducted first from the Federal benefit rate. If there is any excess income, it is deducted from the optional State supplementary payment level.

10. Resource limitations--The limitations placed on the value of a recipient's resources are cited. Resources include such things as a home, household goods, personal effects, an automobile, other property, and life insurance. The SSI program excludes countable resources of $1,600 or less for an individual and $2,400 or less for a couple. Other major exclusions are the recipient's home, an automobile with a market value of $4,500 or less, and personal effects with an equity value of $2,000 or less, the value of burial space, and up to $1,500 per person specifically set aside as burial funds. These exclusions are the same for federally administered optional State supplementary payments as for Federal SSI benefits.

11. Place of application--The office accepting applications for supplementary payments is indicated.

12. Financing of assistance and administrative costs--The source of funds for supplementary payments and administrative costs is specified.

In States requiring financial participation from local governments, the portions contributed by the State and the locality are indicated.

B. State Assistance for "Special" Needs

This assistance is for emergency or special conditions not covered by monthly SSI or optional State supplementary payments. Disaster benefits, burial expenses, additional subsidies for institutional care, and moving expenses are included in this category.

1. Administration--The governmental unit responsible for administering these payments is indicated.

2. Special need circumstances--The special need circumstances (recurring and nonrecurring) for which assistance can be approved are defined. Where available, eligibility requirements and payment limitations are described.

C. Medicaid Eligibility

Medicaid eligibility can either be determined by the guidelines established by the SSI program or by the State. A State may limit the Medicaid coverage of SSI recipients by applying any eligibility criterion from its January 1972 medical assistance standard that was more restrictive than the eligibility conditions established for SSI.

1. Criterion--Entries indicate whether the medical eligibility conditions are based on the SSI program standards, title XVI, or the more restrictive 1972 State standards.

2. Determination by--The governmental unit responsible for determining eligibility is indicated.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

ALABAMA

A. OPTIONAL STATE SUPPLEMENTATION

1. Statutory basis for payment: Title 49, Section 17 (6, 7, 13-15), Code of Alabama 1940, revised 1958.

2. Effective date: January 1, 1974.

3. Administration: County Department of Pensions and Security (State-supervised).

4. Passalong: In compliance by the method of total expenditures.

5. Scope of coverage: Optional supplement provided to aged, blind, or disabled persons living in their own home, the household of another, or in a foster home (licensed or approved by the Department of Pensions and Security) who require personal care and receive SSI or would receive SSI except for income. Additionally, a supplement is provided for persons eligible for disability benefits as residents in cerebral palsy treatment centers.

6. Recoveries, liens, and assignments: None.

7. Relative responsibility: Spouse for spouse; parent and stepparent for child under age 18.

8. Payment levels:

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
	Living independently with personal care: 1/				
	Aged, blind, and disabled				
	Level of independence A	$385.00	$608.00	$60.00	$120.00
	Level of independence B	381.00	600.00	56.00	112.00
	Living in household of another with personal care: 1/				
	Aged, blind, and disabled				
	Level of independence A	276.67	445.34	60.00	120.00
	Level of independence B	272.67	437.34	56.00	112.00
	Living in foster home with personal care: 1/				
	Aged, blind, and disabled	435.00	708.00	110.00	220.00
	Living in cerebral palsy treatment center:				
	Disabled	521.00	880.00	2/196.00	2/392.00

9. Income disregards: Federal SSI income disregards apply.

10. Resource limitations: Federal SSI resource limitations apply.

11. Place of application: County Department of Pensions and Security

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

ALABAMA

DATA ELEMENT	
	A. OPTIONAL STATE SUPPLEMENTATION
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: State funds.
	B. STATE ASSISTANCE FOR "SPECIAL" NEEDS
1. Administration	STATE DOES NOT PROVIDE ASSISTANCE FOR "SPECIAL" NEEDS.
2. Special need circumstances	
	C. MEDICAID ELIGIBILITY
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

1/ Personal care must be recommended by a licensed physician and someone must actually provide and receive payment for the care.
2/ Includes $57.00 personal needs allowance.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION — ALASKA
1. Statutory basis for payment	Alaska Statutes 47.25.430, 47.25.640, 47.25.810, as amended by State Legislative Amendments 1975, chapter 172; and 1977, chapter 83.
2. Effective date	January 1, 1974.
3. Administration	Department of Health and Social Services, Division of Public Assistance (State-administered in local offices).
4. Passalong	In compliance by the method of maintaining all payment levels.
5. Scope of coverage	Optional State supplement provided to every needy aged, blind, and disabled person except those in the Alaska Pioneer's Home, in any nomedical public institution, or in public or private institutions for tuberculosis or mental disease. Blind and disabled children under 18 are not eligible for optional supplementation. Disabled recipients whose earnings exceed the level set for substanital gainful activity but who receive special monthly benefits under Section 1619(a) of the Social Security Act continue to be eligible for State supplementation.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	Children responsible for aged parents; parents responsible for children.
8. Payment levels	See table below.
9. Income disregards	Aged only: Alaska Longevity Bonus ($250).
10. Resource limitations	Federal SSI resource limitation apply.

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
	Living independently: Aged, blind, and disabled	$586.00	$859.00	$261.00	$371.00
	Living independently with ineligible spouse: Aged, blind, and disabled	707.00	N/A	382.00	N/A
	Living in household of another: Aged, blind, and disabled	482.00	707.00	265.33	381.66
	Living in household of another with ineligible spouse: Aged, blind, and disabled	555.00	N/A	338.33	N/A
	Title XIX facility: Aged, blind, and disabled	70.00	140.00	1/45.00	1/90.00

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	ALASKA
A. OPTIONAL STATE SUPPLEMENTATION	
11. Place of application	Local offices of State Department of Health and Social Services, Division of Public Assistance.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: State funds.
B. STATE ASSISTANCE FOR "SPECIAL" NEEDS	
1. Administration	STATE DOES NOT PROVIDE ASSISTANCE FOR "SPECIAL" NEEDS
2. Special need circumstances	
C. MEDICAID ELIGIBILITY	
1. Criterion	Title XVI.
2. Determination by	State.

1/ Personal needs allowance either as a direct supplement to SSI or a deducation from other income applied to the cost of care.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

ARIZONA

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment----------	Arizona Revised Statutes 46:252.
2. Effective date----------	May 9, 1974.
3. Administration----------	Department of Economic Security (State-administered in local offices of State agency in communities); Aging and Adult Administration (housekeeping service supplementation only).
4. Passalong----------	In compliance by the method of maintaining all payment levels.
5. Scope of coverage----------	Optional State supplement provided to SSI recipients who live in licensed supervisory care, adult foster care, or private nursing homes or who live independently and require housekeeping services as well to persons ineligible for SSI who live in licensed county operated nursing homes. Nursing home supplements provided only to aged persons.
6. Recoveries, liens, and assignments----	None.
7. Relative responsibility----------	None.
8. Payment levels----------	See table below.
9. Income disregards----------	None.
10. Resource limitations----------	Optional State supplemental payments shall not be made to or on behalf of any person whose resources exceed the following: 1. Household furnishings used by the person and his or her family in his or her usual place or residence. 2. Wearing apparel and necessary personal effects. 3. A home in which a person resides and land contiguous thereto with gross market value not in excess of $25,000.

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
	Requires housekeeping services: 1/				
	Aged, blind, and disabled	$395.00	N/A	$70.00	N/A
	Licensed private nursing homes: 2/				
	Aged	405.00	648.00	80.00	160.00
	Licensed county operated nursing homes: 3/				
	Aged	174.00	348.00	174.00	348.00
	Licensed supervisory care homes or adult foster care homes: 1/				
	Aged, blind, and disabled	375.00	588.00	50.00	100.00

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	ARIZONA
	A. OPTIONAL STATE SUPPLEMENTATION
10. Resource limitations	4. Tools of trade. 5. Livestock used primarily for domestic purposes. 6. An automobile with gross retail market value of $1,200 or less except that if such value exceeds $1,200, excess value shall be counted against other property or assets. 7. Other property or assets having a gross market value of $1,000 for a single recipient or $1,400 for a recipient and spouse or two or more recipients in single household.
11. Place of application	Local offices of State Department of Economic Security.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: State funds.
	B. STATE ASSISTANCE FOR "SPECIAL" NEEDS
1. Administration	Department of Economic Security.
2. Special need circumstances:	
a. Housekeeping services	A payment of $70 per month made to or in behalf of an SSI recipient who is certified as requiring housekeeper services. If disabled, an individual cannot have more than $400 ($600 for a couple) in cash, bonds, or negotiable securities or more than the fair market value of $800 in other property or assets.
b. Visiting nurse services	Up to $160 to or in behalf of any aged SSI recipient when there is a medical finding to substantiate need.
c. Home health services	Up to $160 to or in behalf of any aged SSI recipient when there is a medical finding to substantiate need.
	C. MEDICAID ELIGIBILITY
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

1/ Only SSI recipients eligible for supplement.
2/ Payment level varies for those ineligible for SSI.
3/ Ineligible for SSI.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

ARKANSAS

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	STATE HAS
2. Effective date	
3. Administration	
4. Passalong 1/	NOT ELECTED
5. Scope of coverage	
6. Recoveries, liens, and assignments	TO PROVIDE
7. Relative responsibility	
8. Payment levels	OPTIONAL
9. Income disregards	
10. Resource limitations	SUPPLEMENTATION
11. Place of application	
12. Financing of assistance and administrative costs	
	B. STATE ASSISTANCE FOR "SPECIAL" NEEDS
1. Administration	STATE DOES NOT PROVIDE ASSISTANCE FOR "SPECIAL" NEEDS
2. Special need circumstances	
	C. MEDICAID ELIGIBILITY
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

1/ For mandatory supplementation, compliance is by the method of maintaining all payment levels.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

CALIFORNIA

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	Section 12000ff, Welfare and Institutions Codes.
2. Effective date	January 1, 1974.
3. Administration	Social Security Administration.
4. Passalong	In compliance by the method of maintaining all payment levels.
5. Scope of coverage	Optional State supplement provided for every aged, blind, and disabled recipient except patients in private noncertified medical facilities and in medical facilities where title XIX pays more than 50 percent of the costs of care. Blind and disabled children are eligible for optional State supplementation. Disabled recipients whose earnings exceed the level set for substantial gainful activity but who receive special monthly benefits under Section 1619(a) of the Social Security Act continue to be eligible for State supplementation.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	None.
8. Payment levels 1/	

Code	Living Arrangements	Combined Federal/State Individual	Combined Federal/State Couple	State supplementation Individual	State supplementation Couple
A	Living independently: Blind	$565.00	2/$1,099.00	$240.00	$611.00
A	Independent living with cooking facilities: Aged and disabled	504.00	936.00	179.00	448.00
B	Nonmedical board and care: Aged, blind, and disabled	569.00	1,139.00	244.00	650.00
C	Living independently without cooking facilities: Aged and disabled	558.00	1,045.00	233.00	557.00
D	Living in household of another: Aged and disabled	395.67	773.34	179.00	448.00
	Blind	456.67	3/936.34	240.00	611.00
E	Disabled minor in home of parent	399.00	N/A	74.00	N/A
F	Nonmedical board and care, living in household of another: Aged, blind, and disabled	460.67	975.34	244.00	650.00
G	Disabled minor in the household of another	290.67	N/A	74.00	N/A

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	CALIFORNIA
A. OPTIONAL STATE SUPPLEMENTATION	
9. Income disregards	Federal SSI income disregards apply.
10. Resource limitations	Federal SSI resource limitations apply.
11. Place of application	Social Security District offices.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: Federal funds.
B. STATE ASSISTANCE FOR "SPECIAL" NEEDS	
1. Adminstration	Health and Welfare Agency, Department of Social Services.
2. Special need circumstances:	
a. Catastrophic events	Replacement of essential household furniture, equipment, and clothing owned by a recipient is allowed when loss, damage, or destruction is due to a catastrophic event such as a fire, flood, or earthquake.
b. Housing	Housing repairs--When housing is owned and repairs are necessary for the health and safety of a recipient or recipient couple and total costs of repairs exceed $10, an allowance may be made for repairs of up to $300 once in a calendar year or up to $750 once in a lifetime. Housing modification--Payment up to a maximum of $750 per recipient, not to exceed $750 per home, shall be allowed. The $750 maximum is cumulative and may be expended in one or more payments. Such a determination shall be based on nonrecurring conditions peculiar to the individual situation. Payment of up to $750 will be allowed to prevent foreclosure as a result of delinquent mortgage payments, deeds of trusts, or liens resulting from delinquent taxes, bonds, assessments, etc., on a home by a recipient or recipient couple.
c. Moving expenses	In the event of eviction or a determination that current housing is unsafe or unhealthful, the cost of packing and moving shall be allowed up to $200 for a recipient or $300 for a recipient couple. Additional payments of up to $300 may be made for the cost of securing rental housing. If the recipient or recipient couple is purchasing a home, payment of up to $750 may be allowed for combined costs of home purchase and moving.
d. Food for guide dogs	Blind recipients with guide dogs receive $30 per month in State aid.
C. MEDICAID ELIGIBILITY	
1. Criterion	Title XVI
2. Determination by	Social Security Administration.

1/ Blind individuals age 65 or over are entitled to the highest payment category for which they qualify.
2/ Payment level when both members of couple are blind; when one member blind, level is $1,037.
3/ Payment level when the members of couple are blind; when one member blind, level is $874.34.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	COLORADO A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	Colorado Revised Statutes (CRS) 26-2, Section 202-209, 1973 as amended.
2. Effective date	January 1, 1974.
3. Administration	State Department of Social Services (State-supervised with local administration).
4. Passalong	In compliance by the method of maintaining all payment levels.
5. Scope of coverage	Optional State supplement provided for aged, blind, and disabled persons living independently, living in adult foster care, or receiving home, and for blind and disabled persons living with an essential spouse. Persons living in the household of another are included under the living independently standard; State supplement is increased to offset the reduced Federal payment. At age 65 a disabled recipient may elect to transfer to the aged category or remain in the disabled category. Blind and disabled children are eligible for State supplementation.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	None.
8. Payment levels 1/	See table below.
9. Income disregards	Aged and disabled: $20 per month plus 1/2 of remainder (to maximum of $30) of earned income, plus mandatory payroll deductions, plus $30 employment expenses, plus additional reasonable employment expenses. Blind: $85 per month plus 1/2 of remainder of earned income, plus mandatory payroll deductions, plus $30 employment expenses, plus additional reasonable employment expenses.
10. Resource limitations	Resources are considered property. Current market value of property is used in determining resources and only net value of property (after deducting the amount of indebtedness or encumbrances) is considered. Basic resource limitation is $1,000. Resource limitation for ineligible spouse of eligible recipient is $2,000. Major property exclusions are:

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
	Living independently: 2/				
	Aged	$383.00	$766.00	$58.00	$278.00
	Blind and disabled	329.00	658.00	4.00	170.00
	Adult foster care:				
	Aged	555.00	N/A	230.00	N/A
	Blind and disabled	499.00	N/A	174.00	N/A
	Home care: 3/				
	Aged	702.00	N/A	377.00	N/A
	Blind and Disabled	646.00	N/A	321.00	N/A
	Individual with essential spouse:				
	Blind and disabled	438.00	N/A	113.00	N/A

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	COLORADO
	A. OPTIONAL STATE SUPPLEMENTATION
10. Resource limitations (con.)	Real estate of any value owned and occupied as a residence, one automobile used for essential transportation, furniture, household equipment, clothing, prepaid burial contracts of $1,000 or less, certain business or farm implements with specified value limitations, and cash surrender value of life insurance policy up to $5,000.
11. Place of application	County Social Services offices.
12. Financing of assistance and administrative costs	Assistance: 80 percent State funds, 20 percent local funds. Administration: 80 percent State funds, 20 percent local funds.
	B. STATE ASSISTANCE FOR "SPECIAL" NEEDS
1. Administration	State Department of Social Services. 4/
2. Special need circumstances:	
Funeral and burial expenses	If funeral costs does not exceed $750 5/, the benefit maximum is $500. If burial costs does not exceed $300, the benefit maximum is $200.
	C. MEDICAID ELIGIBILITY
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

1/ Persons in title XIX facilities who have other sources of income are allowed to keep $29.00 per month as a personal needs allowance.

2/ Combined Federal/State payment level also applies to persons living in the household of another. State supplement is increased to offset the reduced Federal payment for this living arrangement.

3/ Represents maximum allowance. Lesser amounts may be paid according to the amount of home care needed.

4/ At their option, county social services boards may provide optional supplementation for other special need circumstances.

5/ If cost exceeds this amount, no assistance is provided.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

CONNECTICUT

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	Section 17-109, 17-110, and 17-111, Connecticut General Status.
2. Effective date	January 1, 1974.
3. Administration	Department of Income Maintenance (State-administered in local offices of the State agency).
4. Passalong	In compliance by the method of total expenditures.
5. Scope of coverage	Optional supplement provided for aged, blind, and disabled SSI recipients living independently. An individual living in the household of another receives a pro-rated share of rent in addition to basic need items minus countable income. Rental allowances vary in 3 geographical areas. No provision is made for essential persons. Blind children are eligible for supplementation, but disabled children are not. Blind and disabled recipients are reclassified as aged upon reaching 65 years old. Disabled recipients whose earnings exceed the level set for substanial gainful activity but who receive special monthly benefits under section 1619 (a) of the Social Security Act continue to be eligible for State supplementation.
6. Recoveries, liens, and assignments	Liens secure claims against real property. State has preferred mandatory claim against estate to the extent that such estate is not needed for the support of the surviving spouse, parent, or dependent children of the decedent. Lien may be comprised or released upon payment of claim or amount equal to beneficiary's interest. Other resources, including total claim value of life insurance, cash, negotiable securities, bonds, mortgages, etc., must be assigned to agency as a condition of eligibility. If applicant/recipient owns property in another State, he must quitclaim such property to the State in place of a lien as a condition of eligibility.
7. Relative responsibility	Spouse for spouse; children for parents under 65.
8. Payment levels 1/	See table below.
9. Income disregards	Unearned Income: For recipients residing in the community, State disregards $187.20 of unearned income; for recipients residing in boarding homes, $100.20 is disregarded. Earned Income: For the aged and disabled, the first $20 and one-half of the next $60 up to a maximum of $50 per month. For the blind, the first $85 and one-half of the remainder per month. Work related expenses for aged, blind, and disabled: 1) nonpersonal expenses such as union dues (if mandatory) and cost of tools, materials, uniforms if not paid for or furnished by the employer; 2) personal expenses such as Social Security tax, life and health insurance, lunch, and transportation.
10. Resource limitations	No limit on real property occupied as a home. Equity in real property other than a home must be liquidated. Value of personal property (excluding household and personal effects, car if needed, and tools and equipment or livestock essential to production of income) limited to $850 including up to $600 for burial purposes and $250 in cash. All insurance with a claim value of $250 or more must be assigned to the State welfare departments.

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
	Living independently:				
	Aged, blind, and disabled	$465.70	$574.20	1/$140.70	1/$86.20

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	CONNECTICUT
A. OPTIONAL STATE SUPPLEMENTATION	
11. Place of application	Local offices of State agency.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: State funds.
B. STATE ASSISTANCE FOR "SPECIAL" NEEDS	
1. Administration	Department of Income Maintenance.
2. Special need circumstances	
a. Recurring	Hospital insurance (blind and disabled only) Personal health insurance (disabled only) Telephone Transportation Therapeutic diet Life insurance (on exception basis) Garbage collection Conservator or guardian fees
b. Nonrecurring	Security deposits Home property repairs Expenses of securing employment Moving expenses Needs due to catastrophe or eviction Household furnishings Installment payments Telephone installation Emergency utility costs Storage charges
	Conditions for payment and payment amounts not available
C. MEDICAID ELIGIBILITY	
1. Criterion	January 1972.
2. Determination by	State.

1/ Budget process used to establish payment amounts. The amount presented assumes eligibility for the highest rental allowance in the maximum budget amount. Boarding home rate is set by Committee on State payments in accordance with individual cost data for the operations of the facility.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DELAWARE

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	Title 31, Section 505, Delaware Code.
2. Effective date	July 1, 1974.
3. Administration	Social Security Administration and State Department of Health and Social Services, Division of Social Services.1/
4. Passalong	In compliance by the method of maintaining all payment levels.
5. Scope of coverage	Optional State supplement provided for aged, blind, and disabled adults who are 1) SSI recipients or would be except for income and 2) certified by the State Division of Social Services as living in, an approved adult residential-care facility. Blind and disabled children under age 18 are not eligible for supplementation. Children between ages 18-22 may receive benefits under child welfare program. Disabled recipients whose earnings exceed the level set for substantial gainful activity but who receive special monthly benefits under Section 1619(a) of the Social Security Act continue to be eligible for State supplementation.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	None.
8. Payment levels	See table below.
9. Income disregards	Federal SSI income disregards apply.
10. Resource limitations	Federal SSI resource limitations apply.
11. Place of application	Local office of the State agency for placement eligibility; Social Security Administration for payment eligibility.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: State funds for eligibility determinations; Federal funds for payment administration.

Code	Living Arrangement	Combined Federal/State Individual	Combined Federal/State Couple	State supplementation Individual	State supplementation Couple
A	Living in adult residential-care facility: Aged, blind, and disabled	$436.30	$872.60	$111.30	$384.60

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DELAWARE

	B. STATE ASSISTANCE FOR "SPECIAL" NEEDS
1. Administration	State Department of Health and Social Services, Division of Social Services.
2. Special needs circumstances	State provides cash aid for specific emergencies on a one-time basis.
	C. MEDICAID ELIGIBILITY
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

1/ State determines eligibility for special adult residential-care supplement in local offices of State agency; Social Security Administration administers payment.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DISTRICT OF COLUMBIA

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	District of Columbia Laws 2-35, as amended, and 3-23.
2. Effective date	January 1974.
3. Administration	Social Security Administration and District Department of Human Services, Income Maintenance Administration.1/
4. Passalong	In compliance by the method of maintaining all payment levels.
5. Scope of coverage	Optional supplement provided to all aged, blind, or disabled persons who are eligible for SSI payments or would be eligible except for income. No statutory minimum age requirement for receiving adult foster-care supplementation, but children receive assistance through child welfare services provisions. Disabled recipients whose earnings exceed the level set for substantial gainful activity but who receive special monthly benefits under Section 1619(a) of the Social Security Act continue to be eligible for State supplementation.
6. Recoveries, liens, and assignments	None, except those cases in which liens were assigned prior to the establishment of the SSI program.
7. Relative responsibility	None.
8. Payment levels	

Code	Living Arrangements	Combined Federal/State Individual	Combined Federal/State Couple	State supplementation Individual	State supplementation Couple
A.	Adult foster-care home (50 beds or less): Aged, blind, and disabled	$457.20	$914.40	$132.20	$426.40
B.	Adult foster-care home (over 50 beds): Aged, blind, and disabled	567.20	1,134.40	242.20	646.40
C.	Living independently: Aged, blind, and disabled	340.00	518.00	15.00	30.00
D.	Living in household of another: Aged, blind, and disabled	231.67	355.34	15.00	30.00
E.	Living independently with an essential person:2/ Aged, blind, and disabled	503.00	681.00	15.00	30.00

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DISTRICT OF COLUMBIA

DATA ELEMENT	
8. Payment levels (Con.)	A. OPTIONAL STATE SUPPLEMENTATION

Code	Living Arrangements	Combined Federal/State Individual	Combined Federal/State Couple	State supplementation Individual	State supplementation Couple
F.	Living in household of another with an essential person:2/ Aged, blind, and disabled	$340.34	$464.01	$15.00	$30.00
	Title XIX facility: Aged, blind, and disabled	40.00	80.00	15.00	30.00

9. Income disregards	Federal SSI income disregards apply.
10. Resource limitations	Federal SSI resource limitations apply.
11. Place of application	Department of Human Resources, Payment Assistance Administration for institutional placement eligibility; Social Security Administration for payment eligibility.
12. Financing of assistance and administrative costs	Assistance: District of Columbia funds. Administration: Federal funds.
	B. STATE ASSISTANCE FOR "SPECIAL" NEEDS
1. Administration	Department of Human Resources, Payment Assistance Administration.
2. Special need circumstances	Lump-sum payment to persons requiring emergency assistance due to catastrophe. Recipient must have ongoing plan of financial maintenance and generally is entitled to emergency assistance no more than once annually.
	C. MEDICAID ELIGIBILITY
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

1/ For the title XIX supplement, the District determines eligibility and administers the payment. For the adult foster care supplement, the District determines eligibility and the Social Security Administration administers the payment. For all other supplements, the Social Security Administration determines eligibility and administers the payment.

2/ Applies only to recipients transferred from former State assistance programs.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	FLORIDA A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment----------	Chapter 409.026, Florida Statutes, Flordia Statutes 393 as amended by chapter 77-335, Florida Law.
2. Effective date----------	January 1, 1974.
3. Administration----------	Department of Health and Rehabilitative Services, Economic Services Program Office and Development Services Program Office. (State-administered through local offices of State agency in communities.)
4. Passalong----------	In compliance by the method of total expenditures.
5. Scope of coverage----------	Under the Community Care Program an optional State supplement is provided to aged, blind, or disabled persons who either receive SSI payments or meet all SSI criteria except for income and their income does not exceed $390. Under the Long-Term Residential Care Program, an optional State supplement is provided to disabled SSI recipients. Disabled children under age 18 are eligible for supplementation only under the Long-Term Residential Care Program. Blind children under age 18 are ineligible for supplementation.
6. Recoveries, liens, and assignments----	Amount of public assistance received after August 31, 1967 creates a debt against the estate of the aged, blind, and disabled recipients and the State can file a claim after death. Homestead exempt during life of spouse and/or dependent children if occupied as homestead. Liens are filed against property only when the recipient or family of a minor failed to pay established maintenance fees.
7. Relative responsibility----------	None.
8. Payment levels----------	See table below.

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
	Community care program: 1/				
	Adult foster care: 1/				
	Aged, blind, and disabled				
	Normal/Minimal level	$395.00	$790.00	$70.00	$302.00
	Moderate level	425.00	850.00	100.00	362.00
	Adult congregate living facilities:				
	Aged, blind, and disabled	479.00	958.00	154.00	470.00
	Long-term residential care program for the disabled: 2/				
	Foster home:				
	Minimum level	$297.00	N/A	$22.00	N/A
	Moderate level	311.00	N/A	36.00	N/A
	Intensive level	323.00	N/A	48.00	N/A

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	FLORIDA

A. OPTIONAL STATE SUPPLEMENTATION

8. Payment levels (Con.)

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
	Small group home:				
	Minimum level	$399.00	N/A	$124.00	N/A
	Moderate level	411.00	N/A	136.00	N/A
	Intensive level I	424.00	N/A	149.00	N/A
	Intensive level II	437.00	N/A	162.00	N/A
	Intensive level III	449.00	N/A	174.00	N/A
	Large group home/Residential Rehabilitation Center:				
	Minimum level	$425.00	N/A	$150.00	N/A
	Moderate level	444.00	N/A	169.00	N/A
	Intensive level I	453.00	N/A	178.00	N/A
	Intensive level II	461.00	N/A	186.00	N/A
	Intensive level III	473.00	N/A	198.00	N/A
	Title XIX facility:				
	Aged, blind, and disabled	30.00	60.00	5.00	10.00

9. Income disregards

Community Care Program: None.
Long Term Residential Care Program: Up to $50 per month of any income including SSI for personal needs. All of earned income if income is from wages below minimum wage pursuant to the U.S. Fair Labor Standards; one-third of income at or above minimum wage.

10. Resource limitations

Federal SSI resource limitations apply.

11. Place of application

Community Care Program: Local offices of State Department of Health and Rehabilitative Services.
Long Term Residential Care Program: Local Development Service Program offices, Department of Health and Rehabilitative Services.

12. Financing of assistance and administrative costs

Assistance: State funds.
Administration: State funds.

B. STATE ASSISTANCE FOR "SPECIAL" NEEDS

1. Administration

2. Special need circumstances

STATE DOES NOT PROVIDE ASSISTANCE FOR "SPECIAL" NEEDS

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	FLORIDA C. MEDICAID ELIGIBILITY
1. Criterion----------	Title XVI.
2. Determination by----------	Social Security Administration.

1/ Payment includes up to $38 for personal needs allowance. Recipients who lose SSI eligibility because of title II increases may continue to be eligible if they qualify for these living arrangements.

2/ State provides an additional income disregard of up to $50 per month of any income including SSI. The combined Federal and State amount excludes the disregard.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	GEORGIA
A. OPTIONAL STATE SUPPLEMENTATION	
1. Statutory basis for payment	STATE HAS
2. Effective date	NOT ELECTED
3. Administration	TO PROVIDE
4. Passalong 1/	OPTIONAL
5. Scope of coverage	SUPPLEMENTATION
6. Recoveries, liens, and assignments	
7. Relative responsibility	
8. Payment levels	
9. Income disregards	
10. Resource limitations	
11. Place of application	
12. Financing of assistance and administrative costs	
B. STATE ASSISTANCE FOR "SPECIAL" NEEDS	
1. Administration	STATE DOES NOT PROVIDE ASSISTANCE FOR "SPECIAL" NEEDS
2. Special need circumstances	
C. MEDICAID ELIGIBILITY	
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

1/ For mandatory supplementation, compliance is by the method of maintaining all payment levels.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

HAWAII

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	Approval by Attorney General of Hawaii of contract between State and U.S. Department of Health and Human Services.
2. Effective date	January 1, 1974.
3. Administration	Social Security Administration.
4. Passalong	In compliance by the method of maintaining all payment levels.
5. Scope of coverage	Optional supplement provided for every recipient except those who are living in the household of another or who are patients in either 1) medical facilities where title XIX pays more than 50 percent of the cost of care or 2) private medical facilities not certified under title XIX. General eligibility and resource requirements for the SSI payment will be followed for the supplementary payment. Blind and disabled children are eligible for supplemental payments. Payment amounts for eligible children in domiciliary care are determined on an individual basis. Disabled recipients whose earnings exceed the level set for substantial gainful activity but who receive special monthly benefits under Section 1619(a) of the Social Security Act continue to be eligible for State supplementation.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	None.
8. Payment levels	See table below.
9. Income disregards	Federal SSI income disregards apply.
10. Resource limitations	Federal SSI resource limitations apply.
11. Place of application	Social Security Administration District Offices.
12. Financing of assistance and administrative costs	Assistance: State funds. Administrative: Federal funds.

Code	Living Arrangements	Combined Federal/State Individual	Combined Federal/State Couple	State supplementation Individual	State supplementation Couple
A	Living independently: Aged, blind, and disabled	$329.90	$496.80	$4.90	$8.80
F	Domiciliary Care I:1/ Aged, blind, and disabled	404.90	809.80	79.90	321.80
G	Domiciliary Care II:1/ Aged, blind, and disabled	454.90	909.80	129.90	421.80
H	Domiciliary Care III:1/ Aged, blind, and disabled	516.90	1,033.80	191.90	545.80

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

HAWAII

	B. STATE ASSISTANCE FOR "SPECIAL" NEEDS
1. Administration	Department of Social Services and Housing.
2. Special need circumstances	a. Shelter allowances based on household size. b. Housing and utility deposit (one-time only). c. Repair or replacement of stove or refrigerator. d. Emergency assistance due to natural disaster. — Payments made to SSI recipients if their total income is less than the standard of need established by the State.
	C. MEDICAID ELIGIBILITY
1. Criterion	January 1972.
2. Determination by	State.

1/ State certified domiciliary care units.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

IDAHO

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	Idaho State code 56-207, 56-208, 56-209a.
2. Effective date	January 1, 1974.
3. Administration	Department of Health and Welfare (State-administered through local offices of the State agency in communities).
4. Passalong	In compliance by the method of total expenditures.
5. Scope of coverage	Optional State supplement provided for every aged, blind, and disabled person living either independently, with an essential person, in a room and board facility, in a shelter home, or in an adult foster-care home. Persons living in the household of another are included under the living independently standard; State supplement is increased to offset the reduced Federal payment. Blind and disabled children are eligible for optional supplementation. Disabled recipients whose earnings exceed the level set for substantial gainful activity but who receive special monthly benefits under Section 1619(a) of the Social Security Act continue to be eligible for State supplementation as long as their income does not exceed the State's need standards.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	Husband and wife, and parents and children mutually.
8. Payment levels	See table below.

Code	Living Arrangements	Combined Federal/State 1/ Individual	Combined Federal/State 1/ Couple	State supplementation 2/ Individual	State supplementation 2/ Couple
	Living independently: 3/ Aged, blind, and disabled	$383.00	$514.00	$ 78.00	$46.00
	Living with an essential person: Aged, blind, and disabled	514.00	N/A	46.00	N/A
	Room and board facility: Aged, blind, and disabled	473.00	946.00	168.00	478.00
	Hotel-rented room: Aged, blind, and disabled	383.00	514.00	78.00	46.00
	Licensed shelter home: Aged, blind, and disabled	540.00	1,080.00	235.00	612.00
	Unlicensed shelter home: Aged, blind, and disabled	383.00	766.00	78.00	298.00
	Adult foster care home: Aged, blind, and disabled	498.00	996.00	193.00	528.00
	Specialized shelter home: Aged, blind, and disabled	653.00	1,306.00	348.00	838.00

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	IDAHO
A. OPTIONAL STATE SUPPLEMENTATION	
8. Payment levels (Con.)	Code: Living Arrangements: Semi-independent group residential facility: Aged, blind, and disabled. Combined Federal/State 1/ Individual: $489.00; Couple: $978.00. State supplementation 2/ Individual: $184.00; Couple: $510.00
9. Income disregards	All recipients: First $20 per month of any income including SSI and first $65 plus one-half remainder of earned income per month. Disabled: Plus, for up to 36 months, other income and resources needed to achieve approved plan for self-support. Blind: Plus other income and resources needed to achieve approved plan for self-support.
10. Resource limitations	Federal SSI resource limitations apply.
11. Place of application	Local offices of State Department of Health and Welfare.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: State funds.
B. STATE ASSISTANCE FOR "SPECIAL" NEEDS	
1. Administration	Department of Health and Welfare.
2. Special need circumstances:	
a. Restaurant meal allowance	Eating out allowance of up to $50 per month if physically unable to prepare meals.
b. Guide dog	Allowance for care and maintenance of guide dog of up to $17 per month.
c. Room and board	Allowance of $50 for an individual who lives with a relative and does not pay for room and board. If it were not for the relative, this individual would have to live in a nonindependent arrangement.
C. MEDICAID ELIGIBILITY	
1. Criterion	Title XVI.
2. Determination by	State.

1/ State provides an additional income disregard of $20 per month of any income including SSI. The combined Federal and State amount excludes the disregard.

2/ Represents maximum amount paid; lesser amounts may be paid depending on actual costs and the recipient's income.

3/ Combined Federal/State payment level also applies to persons living in the household of another. State supplement is increased to offset the reduced Federal payment for this living arrangement.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	ILLINOIS A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	Illinois Revised Statutes, Chapter 23; Public Aid Code Article III, Section 3-13-3-15.
2. Effective date	March 1, 1974.
3. Administration	Department of Public Aid (State-administered through local offices of State agency).
4. Passalong	In compliance by the method of maintaining all payment levels.
5. Scope of coverage	Optional State supplement provided for all aged, blind, and disabled recipients whose income-maintenance needs based on State standards exceed their monthly SSI benefit plus other income. If the individual has been denied SSI due to level of income, eligibility for an optional State supplemental payment may exist if there is a deficit between all other income and the income-maintenance need based on State standards. Blind and disabled children are eligible for optional supplementation. Disabled recipients whose earnings exceed the level set for substantial gainful activity but who receive special monthly benefits under Section 1619(a) of the Social Security Act continue to be eligible for State supplementation when their income maintenance needs exceed their monthly income.
6. Recoveries, liens, and assignments	All assistance granted to the aged after January 1, 1962 and the blind and disabled after November 1963 constitutes a lien on real property of recipient not enforceable against homestead with a value of less than $25,000 or a homestead occupied by surviving spouse or specified relative who are themselves recipients if no claim filed by other creditors. Also, liens or security interest are filed against mobile homes for assistance received since July 31, 1967. Estate claim filed against real and personal property of (1) person age 65 and older for assistance received since 1936 and (2) blind or disabled person for assistance received November 1963; not enforceable against homestead property under same conditions as affect enforcement of lien.
7. Relative responsibility	Spouse for spouse; parent for child under age 21, except that a parent is not responsible for a child between the ages of 18 and 21 if the child is not living with the parent.
8. Payment levels	Optional supplement amount is equal to the difference between monthly SSI benefits plus other income and the income-maintenance needs based on State standards. The income-maintenance needs of each case is determined individually regardless of living arrangement. Utility allowance varys by geographical area.
9. Income disregards	All recipients: First $25 per month of any income, except income received from a spouse or other person. Aged and disabled: $20 plus one-half of next $60 per month of earned income. Blind: $85 plus one-half of remainder of earned income per month. Blind and disabled: Certain work expenses deducted from earnings. Income and resources needed for 12 months to fulfill a plan for self-support can be exempted.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	ILLINOIS
A. OPTIONAL STATE SUPPLEMENTATION	
10. Resource limitations	Ownership of real property used as a home does not disqualify. In determining need and amount of payment, however, resources from such property are taken into account. All other real and personal property (except clothing, household furnishings, income-producing business or farming equipment, motor vehicles, $1,000 cash value of life insurance per person of a prepaid burial plan or burial merchandise of $1,500) is limited to $1,500 per individual and $2,250 for married couple. Property can not be assigned or transferred within 2 years of the date of application in order to qualify or to increase need for assistance.
11. Place of application	County Department of Public Aid, except to Cook County where application is made at district office of the Department of Public Aid.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: State funds.
B. STATE ASSISTANCE FOR "SPECIAL" NEEDS	
1. Administration	Department of Public Aid.
2. Special need circumstances: a. Purchase and repair of household furniture b. Costs for furniture storage c. Repair and maintenance of property d. Costs of utility services and telephone installment e. Payment of withheld rent	Payment may be made in situations verified for need to individuals eligible for and receiving the optional State supplement. Conditions for payment and payment amounts determined on a case-by-case basis.
C. MEDICAID ELIGIBILITY	
1. Criterion	January 1972.
2. Determination by	State.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	INDIANA
A. OPTIONAL STATE SUPPLEMENTATION	
1. Statutory basis for payment	Indiana Public Law 46, Acts of 1976.
2. Effective date	July 1, 1976.
3. Administration	Department of Public Welfare, County Welfare Departments (State-supervised).
4. Passalong	In compliance by the method of total expenditures.
5. Scope of coverage	Optional State supplement provided to adult Medicaid or SSI recipients who are unable to reside in their own homes because of physical disability, do not require care in a licensed nursing home but need care in a residential facility or boarding home for the aged. 1/ Blind and disabled persons are eligible at age 50 and over. However, some hearing impaired persons may be eligible at age 18 and older. Persons suffering from mental illness or mental retardation are not covered.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	Spouse for spouse.
8. Payment levels	See table below.
9. Income disregards	Disregarded from sheltered workshop earnings are: $16 employment incentive, mandatory earning deductions, and one-half of the remainding earnings.
10. Resource limitations	An individual may have a reserve of personal property (including cash, stocks, bonds,cash surrender value of life insurance, etc.) of no more than $1,500; a couple may have no more than $2,250. If a recipient owns nonhomestead property not occupied by a dependent spouse or child, which is not sufficiently income producing, such property must be offered for sale or rent. Ownership of personal property essential for an adequate living arrangement, income producing activity, production of produce for home consumption, and items of sentimental value shall not affect an individual's eligibility.
11. Place of application	County welfare departments.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: State funds.

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
	Licensed residental-care facility or boarding home for the aged:				
	Aged, blind, and disabled	$660.50	N/A	2/ $335.50	N/A

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	INDIANA
	B. STATE ASSISTANCE FOR "SPECIAL" NEEDS
1. Administration	
2. Special need circumstances	STATE DOES NOT PROVIDE ASSISTANCE FOR "SPECIAL" NEEDS
	C. MEDICAID ELIGIBILITY
1. Criterion	January 1972.
2. Determination by	State.

1/ Care in a licensed residential-care facility or boarding home for the aged consists only of room, board, and laundry together with minimal administrative direction.

2/ Represents maximum amount paid; lesser amounts may be paid depending on cost of facility and income of recipient. Includes a personal allowance payment of up to $28.50 per month.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENTS	A. OPTIONAL STATE SUPPLEMENTATION — IOWA
1. Statutory basis for payment	Chapter 249, Code of Iowa.
2. Effective date	January 1, 1974 (blind), May 1, 1974 (aged and disabled).
3. Administration	Social Security Administration; State Department of Human Services.1/
4. Passalong	In compliance by the method of total expenditures.
5. Scope of coverage	Optional State supplement provided to blind individuals and couples living independently or in the household of another, and to aged, blind, or disabled persons living with a dependent relative or in a family life or residential-care home or receiving in-home health care. Supplementation is not provided to aged or disabled recipients living in their own household or in the household of another, or to residents of emergency shelters or medical facilities. Blind children are eligible for optional supplementation payments if living in own household or with dependent relative; disabled children are eligible for optional supplementation if living with dependent relative. Persons in residential-care facilities must be 16 years old or older. Disabled recipients whose earnings exceed the level set for substantial gainful activity but who receive special monthly benefits under Section 1619(a) of the Social Security Act continue to be eligible for State supplementation.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	None.
8. Payment levels	

Code	Living Arrangements	Combined Federal/State Individual	Combined Federal/State Couple	State supplementation Individual	State supplementation Couple
A	Living independently: Blind	$347.00	2/$532.00	$22.00	2/$44.00
B	Living in household of another: Blind	238.67	2/ 369.34	22.00	2/ 44.00
C	Living with dependent person:3/				
	Aged and disabled	488.00	651.00	163.00	163.00
	Blind	510.00	2/ 695.00	185.00	207.00
	(Converted blind case with essential person)	510.00	2/ 695.00	22.00	44.00
D	Family life home: Aged, blind, and disabled	378.20	776.40	53.20	288.40
	Residential-care: Aged, blind, and disabled	574.41	N/A	4/249.41	N/A
	In-home health care: Aged, blind, and disabled	668.60	N/A	5/343.60	N/A

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENTS	IOWA
A. OPTIONAL STATE SUPPLEMENTATION	
9. Income disregards	Federal SSI income disregards apply.
10. Resource limitations	Federal SSI resource limitations apply.
11. Place of application	Social Security Administration District Offices for federally administered payments; local offices of State Department of Social Services for State-administered payments.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: Federal funds if federally administered. State funds if State-administered.
B. STATE ASSISTANCE FOR "SPECIAL" NEEDS	
1. Administration	STATE DOES NOT PROVIDE ASSISTANCE FOR "SPECIAL" NEEDS.
2. Special need circumstances	
C. MEDICAID ELIGIBILITY	
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

1/ State Department of Human Services administers supplemental payments for persons receiving residential or in-home health-related care. Social Security Administration administers all other supplemental payments.

2/ Payment level where both members of couple are blind, where one member blind payment is reduced by $22.

3/ In household of another when one-third reduction in Federal benefit rate applies, State supplement is increased to offset the reduction.

4/ Represents maximum amount paid based on per diem rate of $12.35 to $17.11 plus $44 per month for personal needs allowance. Payment is State administered.

5/ Payment based on actual cost of in-home health-related care up to a maximum of $343.60 plus basic Federal benefit. Payment is State administered.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	KANSAS
A. OPTIONAL STATE SUPPLEMENTATION	
1. Statutory basis for payment	STATE HAS
2. Effective date	NOT ELECTED
3. Administration	TO PROVIDE
4. Passalong 1/	OPTIONAL
5. Scope of coverage	SUPPLEMENTATION
6. Recoveries, liens, and assignments	
7. Relative responsibility	
8. Payment levels	
9. Income disregards	
10. Resource limitations	
11. Place of application	
12. Financing of assistance and administrative costs	
B. STATE ASSISTANCE FOR "SPECIAL" NEEDS	
1. Administration	STATE DOES NOT PROVIDE ASSISTANCE FOR "SPECIAL" NEEDS
2. Special need circumstances	
C. MEDICAID ELIGIBILITY	
1. Criterion	Title XVI.
2. Determination by	State.

1/ For mandatory supplementation, compliance is by the method of maintaining all payment levels.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION — KENTUCKY
1. Statutory basis for payment	Budget approval by State legislature.
2. Effective date	January 1, 1974.
3. Administration	Cabinet for Human Resources, Department of Social Insurance (State-administered through local offices in communities).
4. Passalong	In compliance by the method of maintaining all payment levels.
5. Scope of coverage	Optional State supplement provided to every aged, blind, and disabled person who has a medically determined need for care in a personal care facility (not title XIX) or in a family care home licensed under the health licensure act or for the services of a caretaker in the home and who has insufficient income to obtain this care. Blind and disabled children are eligible for optional supplementation. Disabled recipients whose earnings exceed the level set for substantial gainful activity but who receive special monthly benefits under Section 1619(a) of the Social Security Act continue to be eligible for State supplementation.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	None.
8. Payment levels	See table below.
9. Income disregards	$65 plus one-half of remainder of earned income per month.
10. Resource limitations	The maximum total countable resources are $1,600 for one person and $2,400 for a couple. Equity of $6,000 in income-producing homestead real property, business or nonbusiness essential for self-support, is excluded from consideration. Burial reserves (prepaid trust funds or life insurance) of up to $1,500 per individual are excluded from consideration. Equity of $4,500 in automobile is excluded from consideration (the total value is excluded in certain instances). Also excluded from consideration are a homestead (occupied or abandoned), household equipment, and farm equipment.
11. Place of application	Local offices of State Cabinet for Human Resources, Department of Social Insurance.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: State funds.

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
	Personal-care facility: 1/ Aged, blind, and disabled	$487.00	N/A	$162.00	N/A
	Family care home: 2/ Aged, blind, and disabled	400.00	N/A	75.00	N/A
	Caretaker in home: Aged, blind, and disabled	354.00	3/$550.00	29.00	$24.00

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	KENTUCKY
B. STATE ASSISTANCE FOR "SPECIAL" NEEDS	
1. Administration	STATE DOES NOT PROVIDE ASSISTANCE FOR "SPECIAL" NEEDS.
2. Special need circumstances	
C. MEDICAID ELIGIBILITY	
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

1/ Represents the maximum paid. Lesser amounts may be paid depending on need.
2/ Mini-homes are State licensed residences for 3 or fewer persons.
3/ Payment level when both members require a caretaker, when only one requires a caretaker, payment level is $512.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

LOUISIANA

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	Senate Concurrent Resolution #133, 1980.
2. Effective date	March 1, 1982.
3. Administration	Office of Family Security.
4. Passalong	In compliance by the method of maintaining all payment levels.
5. Scope of coverage	Optional State supplement provided to every aged, blind, and disabled person residing in nonpsychiatric title XIX care facilities. Persons in psychiatric facilities are not supplemented.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	None.
8. Payment levels	See table below.
9. Income disregards	None.
10. Resource limitations	None.
11. Place of application	Local parish offices of the Office of Family Security.
12. Financing of assistance and administrative costs	State funds.

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
	Title XIX facility: 1/ Aged, blind, and disabled	$40.00	$80.00	$15.00	$30.00

B. STATE ASSISTANCE FOR "SPECIAL" NEEDS	
1. Administration	STATE DOES NOT PROVIDE ASSISTANCE FOR "SPECIAL" NEEDS
2. Special need circumstances	

C. MEDICAID ELIGIBILITY	
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

1/ Up to $40 may be retained monthly as a personal needs allowance.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENATION — MAINE
1. Statutory basis for payment	Part 1-A, Chapter 855A. Title 22, revised Statutes, State of Maine.
2. Effective date	July 1, 1974.
3. Administration	Social Security Administration and Department of Human Services. 1/
4. Passalong	In compliance by the method of maintaining all payment levels.
5. Scope of coverage	Optional State supplement provided to aged, blind, and disabled SSI recipients. Blind and disabled children are eligible for optional supplementation. Disabled recipients whose earnings exceed the level set for substantial gainful activity but who receive special monthly benefits under Section 1619(a) of the Social Security Act continue to be eligible for State supplementation.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	None.
8. Payment levels	

Code	Living Arrangements	Combined Federal/State Individual	Combined Federal/State Couple	State supplementation Individual	State supplementation Couple
A	Living independently: Aged, blind, and disabled	$335.00	$503.00	$10.00	$15.00
B	Living with others: Aged, blind, and disabled	333.00	500.00	8.00	12.00
C	Living in the household of another: Aged, blind, and disabled	224.67	337.34	8.00	12.00
D	Living in a foster home: Aged, blind, and disabled	392.00	784.00	67.00	296.00
E	Living in a licensed boarding home: Aged, blind, and disabled	458.00	916.00	133.00	428.00
	Title XIX facility: 1/ Aged, blind, and disabled	35.00	70.00	10.00	20.00

9. Income disregards	The State has elected to have additional income disregards for determining eligibility for a State supplement. These disregards have the effect of making eligible for a State supplementary payment individuals and couples whose Federal net countable income is less than the sum of the following amounts: (1) Federal payment standard, (2) maximum State supplement, and (3) State income disregards. The maximum State supplementary payment will be paid in full when the Federal net countable income minus the State income disregard is

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	MAINE
A. OPTIONAL STATE SUPPLEMENTATION	
9. Income disregards (Con.)	equal to or less than the Federal payment standard. The maximum State supplementary payment is reduced by the amount the remaining net countable income exceeds the Federal payment standard. 1. Living independently: Individual $42.30 Couple 64.40 2. Living with others: Individual $44.30 Couple 67.40 3. Living in household of another: Individual $44.30 Couple 67.40
10. Resource limitations	Federal SSI resource limitations apply.
11. Place of application	Social Security Administration District Offices.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: Federal funds.
B. STATE ASSISTANCE FOR "SPECIAL" NEEDS	
1. Administration	Department of Human Services.
2. Special need circumstances:	
a. Licensed boarding home subsidies	When costs of care exceed total of SSI and State supplementary payments, State will pay difference up to established maximum rates.
C. MEDICAID ELIGIBILITY	
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

1/ State administers payment to SSI recipients in title XIX facilities.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION — MARYLAND
1. Statutory basis for payment	Annotated Code of Maryland, Article 88A, Section 3 (a), 5, effective January 1, 1974 and Code of Maryland Annotated Regulations, .07.03.07.
2. Effective date	July 1, 1974.
3. Administration	Department of Human Resources, Income Maintenance Administration.
4. Passalong	In compliance by the method of maintaining all payment levels.
5. Scope of coverage	Optional State supplement provided to every aged, blind, and disabled person living in a Project Home facility who is eligible for payments under the SSI program or who would be eligible except for income. Blind and disabled children are not eligible for optional supplementation.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	Husband for wife.
8. Payment levels	See table below.
9. Income disregards	First $72.50 per month of total income including SSI.
10. Resource limitations	Federal SSI resource limitations apply.
11. Place of application	Local county social services agencies.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: State funds.

Code	Living Arrangements	Combined Federal/State 2/ Individual	Combined Federal/State 2/ Couple	State supplementation Individual	State supplementation Couple
	Project Home facility: 1/				
	Minimal Supervision				
	Aged, blind, and disabled	$386.50	$773.00	$134.00	$430.00
	General supervision				
	Aged, blind, and disabled	492.50	985.00	240.00	642.00
	Special services				
	Aged, blind, and disabled	890.50	1,781.00	638.00	1,438.00

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	MARYLAND
B. STATE ASSISTANCE FOR "SPECIAL" NEEDS 3/	
1. Administration	Department of Human Resources, Income Maintenance Administration.
2. Special need circumstances:	
a. Disaster assistance	When there has been a disaster defined as fire, flood, tornado, or civil disorder, allowance may be made for (1) replacement of household furnishings; (2) replacement of clothing; (3) replacement of essential appliances; and (4) provision of temporary shelter, food, and fuel.
b. Eviction, foreclosure	When eviction or forclosure is imminent, allowance may be made to stay eviction or prevent foreclosure; also when eviction or foreclosure has occurred or when individual must otherwise relocate, allowance may be made for (1) moving and storage of possessions and (2) provision of temporary shelter, food, and fuel when required.
c. Emergency assistance	When application has been made for continuing categorical assistance, and the department cannot expedite an eligiblity decision, emergency assistance may be authorized for the person who lacks food, shelter, or fuel.
d. Appliance theft or breakdown	When there is a theft or breakdown of an essential appliance, defined as a refrigerator, cooking or heating stove, or washing machine, allowance may be made for repair or replacement.
e. Away from home allowance	When a person is stranded away from home, allowance may be made for transportation back to place of residence and for $2 per meal enroute.
f. Home allowance for children	When a child is discharged from foster or other institutional care, allowance may be made for establishing a home by authorization of payment for (1) essential appliances and (2) household furnishings.
g. Theft of money	When money has been stolen, and report of the amount and details of theft are made to the police department, allowance to replace stolen amount may be made.
C. MEDICAID ELIGIBILITY	
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

1/ Includes a $45.80 personal needs allowance.
2/ State provides an additional income disregard of $72.50 per month of any income including SSI. The combined Federal and State amount excludes the disregard.
3/ State considers this as "Emergency Assistance Program."

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

MASSACHUSETTS

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	General Laws, Commonwealth of Massachusetts, Chapter 118A, Section 1.
2. Effective date	January 1, 1974.
3. Administration	Social Security Administration and Department of Public Welfare. 1/
4. Passalong	In compliance by the method of maintaining all payment levels.
5. Scope of coverage	Optional State supplement provided to every aged, blind, and disabled recipient including recipients in private medical facilities where Medicaid program is providing 50 percent or less of the cost of care. Blind and disabled children are eligible for optional supplementation. Disabled recipients whose earnings exceed the level set for substantial gainful activity but who receive special monthly benefits under Section 1619(a) of the Social Security Act continue to be eligible for State supplementation.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	None.
8. Payment levels 2/	See table below.
9. Income disregards	Federal SSI income disregards apply.
10. Resource limitations	Federal SSI resource limitations apply.

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
A	Living independently:				
	Aged	$453.82	$689.72	$128.82	$201.72
	Blind	474.74	949.48	149.74	461.48
	Disabled	439.39	668.06	114.39	180.06
B	Shared living expenses:				
	Aged	364.26	689.72	39.26	201.72
	Blind	474.74	949.48	149.74	461.48
	Disabled	355.40	668.06	30.40	180.06
C	Living in household of another:				
	Aged	321.03	541.14	104.36	215.80
	Blind	474.74	949.48	258.07	624.14
	Disabled	304.25	519.52	87.58	194.18
E	Licensed rest home:				
	Aged and disabled	496.58	993.16	171.58	505.16
	Blind	474.74	949.48	149.74	461.48
	Title XIX facility: 1/				
	Aged, blind and disabled	50.00	100.00	25.00	50.00

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	MASSACHUSETTS
A. OPTIONAL STATE SUPPLEMENTATION	
11. Place of application	Social Security Administration District Offices.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: Federal funds.
B. STATE ASSISTANCE FOR "SPECIAL" NEEDS	
1. Administration	Department of Public Welfare, Commission for the Blind.
2. Special need circumstances: 3/	
a. Disaster benefits	Replacement of specific items of furniture, household equipment, supplies, food, and clothing for SSI recipients when the loss of these items is the result of a natural disaster or fire. (Amounts exempted in determining SSI eligibility.)
b. Burial expenses	Payment of funeral and burial expenses for SSI recipients shall not exceed $300 and the total expense shall not exceed $900. When a resource exists, it is deductible from the total expense (maximum $900) and the payment by the Department must not exceed $300 of the balance.
c. Rest home subsidies	When cost of rest home care exceeds the total of SSI and supplementary payments, the State will pay difference up to established maximum rates.
d. Moving expenses	The cost of moving within the State for SSI recipients may be paid once in a 12-month period if (1) present living quarters have been certified as substandard, (2) moving to new quarters is necessary due to health problems or lack of safety in old neighborhood, (3) recipient is moving into Federal/State subsidized housing, or (4) recipient is forced to move. Total payment not to exceed $150.
e. Homemaker and housekeeper services	The Department of Elder Affairs performs homemaker and housekeeping services for recipients age 60 and over. The Department of Public Welfare provides these services for recipients under age 60.
C. MEDICAID ELIGIBILITY	
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

1/ State administers payments to SSI recipients in title XIX facilities.
2/ Blind persons aged 65 and over are entitled to the highest payment level for which they qualify.
3/ Vendor payments.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

MICHIGAN

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	Section 400.10, Act 280 as amended.
2. Effective date	January 1, 1974.
3. Administration	Social Security Administration.
4. Passalong	In compliance by the method of maintaining all payment levels.
5. Scope of coverage	Optional State supplement provided for every recipient except those residing in Medicaid facilities not certified under title XIX or in certified medical facilities where title XIX is paying more than 50 percent of the cost of care. Blind and disabled children are eligible for optional supplementation. Disabled recipients whose earnings exceed the level set for substantial gainful activity but who receive special monthly benefits under Section 1619(a) of the Social Security Act continue to be eligible for State supplementation.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	None.
8. Payment levels	See table below.
9. Income disregards	Federal SSI income disregards apply.
10. Resource limitations	Federal SSI resource limitations apply.

Code	Living Arrangements	Combined Federal/State Individual	Combined Federal/State Couple	State supplementation Individual	State supplementation Couple
A	Living independently: Aged, blind, and disabled	$351.70	$528.00	$26.70	$40.00
B	Living in household of another: Aged, blind, and disabled	235.27	353.17	18.60	27.83
D	Domiciliary-care: Aged, blind, and disabled	412.00	824.00	87.00	336.00
E	Personal-care: Aged, blind, and disabled	482.50	965.00	157.50	477.00
F	Home for the aged: Aged, blind, and disabled	504.30	1,008.60	179.30	520.60
G	Living independently with an essential person:1/ Aged, blind, and disabled	514.70	691.00	26.70	40.00
H	Living in household of another with essential person:1/ Aged, blind, and disabled	343.94	461.84	18.60	27.83

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	MICHIGAN
A. OPTIONAL STATE SUPPLEMENTATION	
11. Place of application	Social Security Administration District Offices.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: Federal funds.
B. STATE ASSISTANCE FOR "SPECIAL" NEEDS	
1. Administration	Department of Social Services.
2. Special need circumstances:	
a. Personal care, chore services	For recipients living independently, payment for help required with personal care and household chores. Maximum of $280 per month.
b. Guide dog maintenance	For blind recipients who have a trained seeing eye dog; $20 per month.
c. Emergency needs	Services provided for a number of needs arising from specific acceptable causes beyond the recipient's resources to control. Acceptable causes include among others: 1. Lost or stolen SSI 2. Fires, floods, and other physical disasters 3. Eviction or foreclosure 4. Mechanical failure of essential appliances 5. Home repairs necessary to protect health 6. Utility shutoff
d. General assistance	SSI recipients are eligible if general assistance standards indicate that their needs are greater than their SSI payment plus other income.
C. MEDICAID ELIGIBILITY	
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

1/ Payment levels for essential person apply only to converted cases.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION — MINNESOTA
1. Statutory basis for payment	Minnesota Statutes Annotated, Section 256D.35-256D.41.
2. Effective date	April 1, 1974.
3. Administration	County Welfare and Human Service Boards (State-supervised). 1/
4. Passalong	In compliance by the method of total expenditures.
5. Scope of coverage	Optional State supplement provided to SSI recipients and to persons who, but for excess income and resources, would be receiving SSI and who have maintenance needs based on the December 1973 State standards which exceed their income from the Federal SSI and other income, and who would otherwise have qualified for benefits under former State assistance programs for the aged, blind, and disabled. Blind children are eligible for supplementation; disabled children under age 18 are not eligible for supplementation. Disabled recipients whose earnings exceed the level set for substantial gainful activity but who receive special monthly benefits under Section 1619(a) of the Social Security Act continue to be eligible for State supplementation.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	Spouse for spouse. Parents for blind children under age 18.
8. Payment levels	See table below.
9. Income disregards	Aged: The first $20 per month of net earnings and 50 percent of the next $60 of earnings. Disabled: The first $65 of earned monthly gross income and one-half of the remaining earned income. Blind: $7.50 per month of any income plus the first $85 of earned income and half of additional earned income per month. Disabled and Blind: For a period not in excess of 36 months such additional amounts of other income and resources as may be necessary for an individual to achieve self-support when the individual has a plan for self-support which has been approved by the State agency.

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
	Living independently: 2/				
	Aged, blind, and disabled	$360.00	$554.00	$35.00	$66.00
	Living in household of another: 2/				
	Aged, blind, and disabled	276.00	484.00	59.33	158.66
	Nonmedical, group residential facility:				
	Aged, blind, and disabled	3/	3/	3/	3/

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	MINNESOTA
A. OPTIONAL STATE SUPPLEMENTATION	
10. Resource limitations	All recipients: May own real property, the market value of which, minus encumbrances, does not exceed $45,751. Local agency may permit eligibility if real and personal property assets exceed limits but liquidation would cause undue hardship. No supplemental aid paid to an aged, disabled, or blind recipient who alone or with spouse has within 3 years prior to application, deprived himself/herself directly or indirectly of any property for the purpose of qualifying for assistance. Aged: May have up to $1,000 in cash surrender value of life insurance. Disabled: May have up to $500 in cash surrender value of life insurance. Aged and disabled: Assets convertible into cash may not exceed $300 if single, $450 if married; may retain up to $750 in prepaid funeral contract plus interest accrual up to $200. Mobile home used as a residence is excluded from limitation. Ownership of an automobile with a market value of $1,650 or less is disregarded. Blind: If single, may retain up $2,000 in undifferentiated assets and, within this maximum, each person may have $750 in the form of a prepaid funeral contract plus accrual of interest up to $200. If married, may together with spouse retain up to $4,000 in undifferentiated liquid assets and, within this maximum, each person may have $750 in the form of a prepaid funeral contract plus accrual of interest up to $200.
11. Place of application	County Welfare and Human Services Boards.
12. Financing of assistance and administrative costs	Assistance: 85 percent State funds; 15 percent county funds. Administration: County funds; except salary expenses: 50 percent State funds, 50 percent county funds.
B. STATE ASSISTANCE FOR "SPECIAL" NEEDS	
1. Administration	County Welfare and Human Services Boards (State-supervised).
2. Special need circumstances	Amounts of assistance to be allowed for items not covered by the mandatory State standards shall be determined on the basis of need in each case.
a. Recurring special needs	
1. Diets	Specified modified diets when prescribed by a physician shall be allowed at designated rate.
2. Newspaper	Newspaper daily or weekly rate allowed when requested.
3. Transportation	Nonmedical transportation allowance made when requested by the recipient and the need for such is documented.
4. Telephone	Minimum rate for telephone allowed when requested and geographic location or medical necessity requires telephone.
b. Nonrecurring special needs	
1. Housing, major repairs	Payment for catastrophic situations only for homeowners.
2. Furniture and appliances	Payment for necessary repairs and replacements.
3. Moving expenses	To be granted within the State when no other resources exist.
4. Fuel and utility	To be allowed annually upon request for only the difference between the standard allowance and the verified consumption by recipients.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	C. MEDICAID ELIGIBILITY	MINNESOTA
1. Criterion	January 1972.	
2. Determination by	State.	

1/ Payments are made under the "Minnesota Supplemental Aid Program."
2/ Represents basic monthly need standards for shelter, food, clothing, personal needs, household supplies, and utilities for an individual or couple residing in Hennepin County (Minneapolis) only. Amounts can vary depending on specific needs.
3/Recipients allowed $40 a month for clothing and personal needs. The rate for previously certified boarding care homes is set by DPW Rule 49. The payment rate for boarding care homes which have not been previously certified and for all other facilities is negotiated by county welfare departments.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	MISSISSIPPI
A. OPTIONAL STATE SUPPLEMENTATION	
1. Statutory basis for payment	STATE HAS
2. Effective date	
3. Administration	
4. Passalong 1/	NOT ELECTED
5. Scope of coverage	
6. Recoveries, liens, and assignments	
7. Relative responsibility	
8. Payment levels	TO PROVIDE
9. Income disregards	
10. Resource limitations	
11. Place of application	OPTIONAL
12. Financing of assistance and administrative costs	
	SUPPLEMENTATION
B. STATE ASSISTANCE FOR "SPECIAL" NEEDS	
1. Administration	STATE DOES NOT PROVIDE ASSISTANCE FOR "SPECIAL" NEEDS
2. Special need circumstances	
C. MEDICAID ELIGIBILITY	
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

1/ For mandatory supplementation, compliance is by the method of maintaining all payment levels.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

MISSOURI

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	Supplemental aid to the blind: Revised Missouri Statutes, Section 209. All other supplementation: Revised Missouri Statutes, Section 208.030, Subchapter 5.
2. Effective date	January 1, 1974.
3. Administration	Department of Social Services; Division of Family Service.
4. Passalong	In compliance by the method of maintaining all payment levels.
5. Scope of coverage	Optional State supplement provided to any aged person or any blind or disabled person over age 18 who is not a resident of a title XIX facility, but is a resident of a licensed residential-care facility or a licensed intermediate care/skilled nursing home and whose cash in come insufficient to cover facility costs. Blind persons over age 18 living on on their own are also supplemented.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	Spouse for spouse.
8. Payment levels	See table below.
9. Income disregards	Blind: First $65 plus one-half remainder of earned income.
10. Resource limitations	Aged/disabled - $1,000 individual, $2,000 couple. Blind - $2,000 individual, $4,000 couple.
11. Place of application	County welfare offices.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: State funds.

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
	Licensed residential-care facility I: Aged, blind, and disabled	455.00	748.00	130.00	260.00
	Licensed residential-care facility II: Aged, blind, and disabled	$569.00	$976.00	$244.00	$488.00
	Licensed intermediate care or skilled nursing home: Aged, blind, and disabled	650.00	1,138.00	325.00	650.00
	Aid to the blind	1/	1/	290.00	580.00

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	MISSOURI
	B. STATE ASSISTANCE FOR "SPECIAL" NEEDS
1. Administration	
2. Special need circumstances	STATE DOES NOT PROVIDE ASSISTANCE FOR "SPECIAL" NEEDS.
	C. MEDICAID ELIGIBILITY
1. Criterion	January 1972.
2. Determination by	State.

1/ Only those recipients who receive less than $290 monthly in SSI payments and less than $311 monthly from other sources qualify for this supplement. The State supplement is reduced dollar-for-dollar by the SSI payment.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

MONTANA

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	Revised Code of Montana, Section 71-120.
2. Effective date	July 1, 1974.
3. Administration	Social Security Administration.
4. Passalong	In compliance by the method of maintaining all payment levels.
5. Scope of coverage	Optional State supplement provided to persons residing in State certified residential-care, foster-care, semi-independent care, and homes for the mentally retarded or developmentally disabled. Developmentally disabled children in foster-care (including those who are blind) are eligible for State supplementation. All other blind and disabled children are ineligible for State supplementation.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	None.
8. Payment levels 1/	See table below.
9. Income disregards	Federal SSI income disregards apply.
10. Resource limitations	Federal SSI resource limitations apply.
11. Place of application	Social Security Administration District Offices.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: Federal funds.

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
G	Residential-care: Aged, blind, and disabled	$419.00	$681.00	$94.00	$193.00
H	Group home for mentally retarded: Aged, blind, and disabled	419.00	681.00	94.00	193.00
I	Community home for developmentally disabled: Aged, blind, and disabled	419.00	681.00	94.00	193.00
J	Child and adult foster care: Aged, blind, and disabled	377.75	598.50	52.75	110.50
K	Semi-independent care: Aged, blind, and disabled	351.00	545.00	26.00	57.00

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBLITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	MONTANA
B. STATE ASSISTANCE FOR "SPECIAL" NEEDS	
1. Administration	STATE DOES NOT PROVIDE ASSISTANCE FOR "SPECIAL" NEEDS
2. Special need circumstances	
C. MEDICAID ELIGIBILITY	
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

1/ All care facilities must be State certified. Persons in title XIX facilities are allowed to retain up to $40 as a personal needs allowance.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

NEBRASKA

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	Section 68-1005, Code of Nebraska, Legislative Bill 311.
2. Effective date	January 1, 1974.
3. Administration	Department of Social Services.
4. Passalong	In compliance by the method of total expenditures.
5. Scope of coverage	Optional State supplement provided to every aged, blind, and disabled recipient except those in public institutions where title XIX is not paying for the cost of care. Persons living in the household of another are included under the living independently standard; State supplement is increased to offset the reduced Federal payment. Blind and disabled children are eligible for optional supplementation payments.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	Spouse for spouse; parent for child under age 19 who is part of household.
8. Payment levels	See table below.

Code	Living Arrangements	Combined Federal/State 1/ Individual	Combined Federal/State 1/ Couple	State supplementation Individual	State supplementation Couple
	Living independently: 2/ Aged, blind, and disabled	$386.00	$580.00	$68.50	$99.50
	Living with an essential person: Aged, blind, and disabled	580.00	N/A	99.50	N/A
	Room and board facility: 3/ Aged, blind, and disabled	352.00	704.00	34.50	223.50
	Licensed domiciliary facility: 3/ Aged, blind, and disabled	372.00	744.00	54.50	263.50
	Certified adult family home: 3/ Aged, blind, and disabled	397.00	794.00	79.50	313.50
	Licensed residential-care facility: 3/ Aged, blind, and disabled	402.00	804.00	84.50	323.50
	Title XIX facility: 4/ Aged, blind, and disabled	30.00	60.00	5.00	10.00
	Licensed group home for children or child caring agency: Disabled	372.00	N/A	54.50	N/A
	Center for developmentally disabled	407.00	N/A	89.50	N/A

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	NEBRASKA
A. OPTIONAL STATE SUPPLEMENTATION	
9. Income disregards	Aged and disabled: First $7.50 per month of unearned income including SSI. Of the first $80 earned income, $20 is disregarded plus one-half of the remainder. Blind: First $7.50 per month of unearned income including SSI. First $85 plus one-half of the remainder of earned income. For a period not to exceed 12-months, additional amounts may be disregarded for those with a self-support plan; State approval is required.
10. Resource limitations	Available resources include all property or interest in property that an individual owns and may convert to cash except: (a) real property which the individual occupies as a home; (b) household goods of a moderate value used in the home; (c) assets up to $3,000 used in a planned effort toward self-support; (d) cash value of life insurance with face value of $1,500 or less per individual; (e) $1,500 equity in a motor vehicle used in an approved plan for employment or rehabilitation; f) $3,000 in an irrevocable burial trust fund. Total resource allowance not to exceed $1,600 for one; $2,400 for two; and an additional $25 for each individual.
11. Place of application	Local offices of the Department of Social Services.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: State funds.
B. STATE ASSISTANCE FOR "SPECIAL" NEEDS	
1. Administration	Department of Social Services.
2. Special need circumstances:	
a. Transportation costs	Twenty-one cents per mile for (1) school attendance outside of school district and (2) obtaining medical services if recipient used own car.
b. Repair or purchase of furniture/appliances	Repair or purchase of furniture or appliances over $75 total cost may be included (with State office approval) if the unit lacks essential items.
c. Moving expenses	Costs of moving may be included if the client is forced to move for reasons beyond the control of the client or to obtain shelter at less cost to the client.
d. Taxes	Back taxes may be included if both the individual would soon lose the home, and the plan to remain in the home is preferred by the individual and recommended by the worker.
e. Home repairs	Vendor payment for home repairs (to $500) made if necessary for the recipient's health or safety or if condemnation of the property is imminent.
f. Meals and lodging	The cost of meals (to $12 per day) and lodging if verified as related to obtaining approved health services may be granted if the individual is away from home for more than 12 hours.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENTS	C. MEDICAID ELIGIBILITY — NEBRASKA
1. Criterion	January 1972.
2. Determination by	State.

1/ State provides an additional income disregard of $7.50 per month of unearned income including SSI. The combined Federal and State amount excludes the disregard.

2/ Combined Federal/State payment level also applies to persons living in the household of another. State supplement is increased to offset the reduced Federal payment for this living arrangement.

3/ Includes a minimum of $30 for personal needs allowance.

4/ If a guardian or conservator has been appointed, payment is increased $5 per month per recipient.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

NEVADA

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	Nevada Revised Statutes, Title 38, Public Welfare.
2. Effective date	January 1, 1974.
3. Administration	Social Security Administration.
4. Passalong	In compliance by the method of maintaining all payment levels.
5. Scope of coverage	Optional State supplement provided for every aged or blind recipient except those in medical institutions. State does not have an assistance program for disabled persons. Blind children are eligible for optional supplementation.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	None.
8. Payment levels 1/	See table below.
9. Income disregards	Federal SSI income disregards apply.
10. Resource limitations	Federal SSI resource limitations apply.
11. Place of application	Social Security Administration District Offices.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: Federal funds.

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
A	Living independently:				
	Aged	$361.40	$562.46	$36.40	$74.46
	Blind	434.30	2/ 862.60	109.30	374.60
B	Living in household of another:				
	Aged	240.94	374.97	24.27	49.63
	Blind	430.63	3/ 857.27	213.96	531.93
C	Domiciliary Care:				
	Aged and blind	558.00	1,110.00	233.00	622.00

	B. STATE ASSISTANCE FOR "SPECIAL" NEEDS
1. Administration	STATE DOES NOT PROVIDE ASSISTANCE FOR "SPECIAL" NEEDS
2. Special need circumstances	

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	C. MEDICAID ELIGIBILITY — NEVADA
1. Criterion	Title XVI.
2. Determination by	State.

1/ Blind individuals aged 65 and over are entitled to the highest payment category for which they qualify. A supplement is not paid to SSI recipients whose eligibility is based on disability.
2/ Payment level when both members are blind; when one member aged, payment level is $712.53.
3/ Payment level when both members are blind; when one member aged, payment level is $616.12.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

NEW HAMPSHIRE

A. OPTIONAL STATE SUPPLEMENTATION

1. Statutory basis for payment

Regulations and Statutes Amended, 167:7, I, II, III, IV.

2. Effective date

January 1, 1974.

3. Administration

Department of Health and Welfare, Division of Welfare (State-administered in local offices in communities).

4. Passalong

In compliance by the method of maintaining all payment levels.

5. Scope of coverage

Optional State supplement provided to aged, blind, and disabled persons who live either independently, with a essential person, in a shared home for adults, or in a title XIX facility. Blind children are eligible for optional supplementation. Disabled children are eligible for optional supplementation only if they are 18 years old or over.

6. Recoveries, liens, and assignments

Aged and disabled: All aid paid is by law a lien on the estate of the recipient (and spouse if living together). No recovery from real estate occupied by surviving spouse or blind or disabled child or from personal property of less than $100. State may waive recovery.
Blind: No lien provisions applicable.

7. Relative responsibility

Spouse for spouse, parents for children under 18, children for parents.

8. Payment levels

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
	Living independently:				
	Aged, blind, and disabled	$339.00	$489.00	$27.00	$21.00
	Living with essential person: 1/				
	Aged, blind, and disabled	N/A	639.00	N/A	13.00
	Living in shared home for adults:				
	Aged, blind, and disabled	512.00	N/A	200.00	N/A
	Title XIX facility:				
	Aged, blind, and disabled	30.00	60.00	5.00	10.00

9. Income disregards

Standards disregards for any income including SSI:

	Individual	Couple
Living independently	$13.00	$20.00
Living with essential person	N/A	25.00
Living in shared home for adults	13.00	N/A

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	NEW HAMPSHIRE
A. OPTIONAL STATE SUPPLEMENTATION	
9. Income disregards (Con.)	Earned income disregards: Aged and disabled: $18 or actual employment expenses if greater; $20 of gross income plus one-half of the next $60. Blind: $18 or actual employment expenses if greater; $85 of gross earnings plus one-half amount over $85. Additional amounts may be disregarded if an approved plan for achieving self-support with a 12-month period exists. Other disregards: If recipient receives income from other persons in exchange for providing maintenance for such person(s) the following amounts are deducted from such income: From one person..... $50 From two persons..... 100 From three persons..... 150 From four or more persons, deduct an additional $50 from such income for each additional person. Actual expenses if greater may be allowed, subject to verification. For adults being considered for nursing home care, SSI payments are disregarded in the determination of financial eligibilty.
10. Resource limitations	No monetary or acreage limitation on property occupied as a home. Personal property limited to $1,500 net cash value for an individual or a couple excluding clothing, household furnishings, tools, car, life insurance, and farm equipment/livestock used for food needs. Face value of life insurance not counted unless it exceeds $1,500 per person; when it exceeds this, equity value counts and may not exceed $1,000 per person with a limit of $3,000 per group.
11. Place of application	Local offices of State Division of Welfare.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: State funds.
B. STATE ASSISTANCE FOR "SPECIAL" NEEDS	
1. Administration	STATE DOES NOT PROVIDE ASSISTANCE FOR "SPECIAL" NEEDS
2. Special need circumstances	
C. MEDICAID ELIGIBILITY	
1. Criterion	January 1972.
2. Determination by	State.

1/ Applies only to SSI recipients converted from former State assistance programs.
2/ The combined Federal and State amount excludes the additional monthly income disregards provided by the State. The State's monthly disregards of any income including SSI are: living independently, individual $13, couple $20; living with essential person, couple $25; living in shared home for adults, individual $13.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

NEW JERSEY

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	New Jersey Statutes Annotated, 44:7-86.
2. Effective date	January 1, 1974.
3. Administration	Social Security Administration.
4. Passalong	In compliance by the method of maintaining all payment levels.
5. Scope of coverage	Optional supplement provided for every aged, blind, and disabled recipient except those in medical institutions and in publicly operated community residences or shelters. Supplementation provided to recipients in approved residential facilities. Blind and disabled children are eligible for optional supplementation. Disabled recipients whose earnings exceed the level set for substantial gainful activity but who receive special monthly benefits under Section 1619(a) of the Social Security Act continue to be eligible for State supplementation.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	None.
8. Payment levels	See table below.
9. Income disregards	Federal SSI income disregards apply.
10. Resource limitations	Federal SSI resource limitations apply.
11. Place of application	Social Security Administration District Offices.
12. Financing of assistance and administrative costs	Assistance: 75 percent State funds and 25 percent local funds. Administration: Federal funds.

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
A	Licensed residential facility:1/ Aged, blind, and disabled	$475.05	$931.36	$150.05	$443.36
B	Living alone or with others: Aged, blind, and disabled	356.25	513.36	31.25	25.36
C	Living with ineligible spouse: Aged, blind, and disabled	513.36	N/A	188.36	N/A
	Living with essential person:2/ Aged, blind, and disabled	513.36	N/A	25.36	N/A
D	Living in household of another: Aged, blind, and disabled	260.98	418.43	44.31	93.09

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	NEW JERSEY
B. STATE ASSISTANCE FOR "SPECIAL" NEEDS	
1. Administration	Department of Human Services, Division of Public Welfare.
2. Special need circumstances	Emergency assistance for catastrophic events and burial and funeral payments. Eligibility for payments based on meeting requirements for mandatory minimum or optional State supplementary payments.
C. MEDICAID ELIGIBILITY	
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

1/ State supplement includes a $50 personal needs allowance per person per month.
2/ Payment levels for essential person apply only to cases transferred from former State assistance programs with "grandfather" essential persons.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

NEW MEXICO

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	Chapter 51, Laws of 1976.
2. Effective date	July 1, 1976.
3. Administration	County offices of the Human Services Department (State-administered).
4. Passalong	In compliance by the method of maintaining all payment levels.
5. Scope of coverage	Optional State supplement provided to eligible recipients of SSI who reside in a licensed adult residential-care home. Blind and disabled children are eligible for optional supplementation. Disabled recipients whose earnings exceed the level set for substantial gainful activity but who receive special monthly benefits under Section 1619(a) of the Social Security Act continue to be eligible for State supplementation if they reside in a licensed adult residential-care home.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	None.
8. Payment levels 1/	See table below.
9. Income disregards	None.
10. Resource limitations	None.
11. Place of application	County offices of the Human Services Department.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: State funds.

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
	Licensed adult residential care home: 2/				
	Aged, blind, and disabled	$400.00	$638.00	$75.00	$150.00

	B. STATE ASSISTANCE FOR "SPECIAL" NEEDS
1. Administration	County offices of Human Services Department (State-administered).
2. Special need circumstances	Burial expenses provided for deceased SSI recipients including disabled recipients who received special monthly benefits under Section 1619(a) of the Social Security Act. Payment of up to $200 toward funeral expenses if available resources of the deceased are insufficient to cover costs and no other person will assume expenses. No payment is made when resources available from all sources total $600 or more.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

NEW MEXICO

DATA ELEMENT	C. MEDICAID ELIGIBILITY
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

1/ Persons in title XIX facilities who have other sources of income are allowed to keep $30 a month as a personal needs allowance.
2/ Children may reside in such facilities.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

NEW YORK

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	Section 209, New York State Social Services Law.
2. Effective date	January 1, 1974.
3. Administration	Social Security Administration and Department of Social Services.1/
4. Passalong	In compliance by the method of maintaining all payment levels.
5. Scope of coverage	Optional State supplement provided for every recipient except those in community operated residences having 16 or fewer residents or in publicly operated emergency shelters. Blind and disabled children are eligible for optional State supplementation at the Congregate Care Level I rate 2/, the Level II rate, and the "living with others" rate. Congregate care is provided in nonmedical setting. Level I 3/ consists of family-type homes, foster homes for adults, and family-care homes which serve persons unable to function completely independently. Level II consists of homes for the aged and residential facilities for children with mental disabilities and for adults. Level III consists of facilities for mentally retarded or brain damaged persons. Supplementation for congregate care varies according to geographical area. Disabled recipients whose earnings exceed the level set for substantial gainful activity but who receive special monthly benefits under Section 1619(a) of the Social Security Act continue to be eligible for State supplementation.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	None.
8. Payment levels	See table below.

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
A	Living alone:				
	Aged, blind, and disabled	$385.91	$564.03	$60.91	$76.03
B	Living with others:				
	Aged, blind, and disabled	333.24	515.03	8.24	27.03
C	Congregate care I: 4/5/				
	Aged, blind, and disabled				
	Area A	448.96	897.92	123.96	409.92
	Area B, C	410.96	821.92	85.96	333.92
D	Congregate care II: 5/6/				
	Aged, blind, and disabled				
	Area A, B	649.86	1,299.72	324.86	811.72
	Area C	619.86	1,239.72	294.86	751.72
E	Congregate care III: 5/7/				
	Aged, blind, and disabled				
	Area A	807.96	1,615.92	482.96	1,127.92
	Area B, C	783.96	1,567.92	458.96	1,079.92

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	NEW YORK
8. Payment levels (Con.)	A. OPTIONAL STATE SUPPLEMENTATION

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
F	Living in household of another: Aged, blind, and disabled	$224.91	$352.37	$8.24	$27.03
	Title XIX facility: 1/B/ Aged, blind, and disabled	40.00	80.00	15.00	30.00

9. Income disregards	Federal SSI income disregards apply.
10. Resource limitations	Federal SSI resource limitations apply.
11. Place of application	Social Security Administration District Offices.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: Federal funds.
	B. STATE ASSISTANCE FOR "SPECIAL" NEEDS
1. Administration	Department of Social Services.
2. Special need circumstances:	
a. Shelter-related expenses	An emergency assistance grant can be provided to an SSI recipient to safeguard health, safety, and welfare.
b. Replacement of basic need items	Moving expenses, brokers fees, security deposits, storage fees, maintenance of home during hospitalization, establishment of a home when deinstitutionalized.
c. Repair or replacement of major appliances	Replacement of furniture, clothing, food, fuel, etc., lost as a result of fire, flood, or other castastrophe.
d. Food for guide dog	Repair or replacement of essential household equipment, including heating and plumbing equipment, and major appliances.
e. Other circumstances	A recurring assistance grant is provided to a blind person who is not employed for the purchase of food for a guide dog.
	Payments for goods and services already received; chattel mortgages and conditional sales contracts; replacement of lost, stolen, or mismanaged cash; replacement of lost, stolen, or unreceived SSI checks (subject to recoupment).

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	C. MEDICAID ELIGIBILITY	NEW YORK
1. Criterion	Title XVI.	
2. Determination by	Social Security Administration.	

1/ The State administers payments to SSI recipients in title XIX facilities.
2/ Children must be placed by Department of Mental Hygiene (DMH).
3/ Eligibility is based on certification of placement by the Department of Social Services (DSS) or DMH. Facilities are developed and approved by DSS or DMH.
4/ The minimum personal needs allowance is $46.58.
5/ Payment levels differ by geographic area. Area A is New York City, Area B is Nassau County, and Area C is all other counties.
6/ The minimum personal needs allowance is $56.93.
7/ The minimum personal needs allowance is $35.23.
8/ Supplementation is limited to SSI recipients who are New York State residents and reside in health care facilities defined in Section 2801 of the New York State Public Health Law (i.e., hospitals, nursing homes).

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	NORTH CAROLINA A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	General 108A.40 through 108A.47 and Chapter 111.
2. Effective date	January 1, 1974.
3. Administration	Department of Human Resources, Division of Social Services 1/ and Division of Blind Services (State-supervised and county-administered).
4. Passalong	In compliance by the method of total expenditures.
5. Scope of coverage	Optional State supplementation provided to aged, blind, and disabled persons in domiciliary-care facilities. Blind persons ineligible for SSI are also supplemented in other living arrangements. Patients in institutions for tuberculosis or mental disease are not eligible for optional supplementation. Disabled children are ineligible for State supplementation.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	Spouse for spouse.
8. Payment level	See table below.
9. Income disregards	All categories: A $9 exemption applies to any income including SSI. Aged and disabled: For earned income, the first $20 per month plus one-half of the remainder up to a maximum of $50 total disregard, plus work-related expenses and $10 for incentives. Blind: For earned income, first $85 plus one-half of remainder.
10. Resource limitations	Real property used as a home is excluded. Real property not used as a home and all personal property (savings, cash value of insurance, bonds, and any other cash reserves) are limited to $1,000 for aged and disabled individuals; $1,100 for aged and disabled couples; and $2,000 for blind individuals. May have equity in essential motor vehicle not to exceed $1,000. Excluded from consideration are irrevocable burial contact and household and personal effects (tools, equipment, and livestock).

8. Payment level

Code	Living Arrangements	Combined Federal/State 2/ Individual	Combined Federal/State 2/ Couple	State supplementation Individual	State supplementation Couple
	Domiciliary care:				
	Ambulatory				
	Age and disabled 3/	$585.00	$899.00	$269.00	$420.00
	Blind 4/	586.00	—	270.00	—
	Semi-ambulatory				
	Aged, blind, and disabled 3/	614.00	928.00	298.00	449.00
	Blind ineligible for SSI:				
	Not paying shelter and utilities	N/A	N/A	97.00	5/194.00
	Paying shelter and utilities	N/A	N/A	146.00	6/243.00

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	NORTH CAROLINA
	A. OPTIONAL STATE SUPPLEMENTATION
11. Place of application	Local offices of Division of Social Services.
12. Financing of assistance and administrative costs	Assistance: State - 70 percent; county - 30 percent. Administration: County funds.
	B. STATE ASSISTANCE FOR "SPECIAL" NEEDS
1. Administration	STATE DOES NOT PROVIDE ASSISTANCE FOR "SPECIAL" NEEDS
2. Special need circumstances	
	C. MEDICAID ELIGIBILITY
1. Criterion	January 1972.
2. Determination by	State.

1/ Program providing assistance to aged and disabled persons known as "State/County Special Assistance for Adults."
2/ State provides an additional income disregard of $9 per month of any income including SSI. The combined Federal and State amount excludes the disregard.
3/ Includes a $20 personal allowance.
4/ The personal allowance is $30: $9 of which is obtained through an income exemption and $21 of which is included in the optional State supplementation. Persons not qualifying for the $9 exemption (e.g. have no income) receive $9.
5/ If only one member of the couple is blind, payment level is $146.
6/ If only one member of the couple is blind, payment level is $219.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	NORTH DAKOTA
	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	STATE HAS
2. Effective date	
3. Administration	
4. Passalong 1/	
5. Scope of coverage	NOT ELECTED
6. Recoveries, liens, and assignments	
7. Relative responsibility	
8. Payment levels	TO PROVIDE
9. Income disregards	
10. Resource limitations	
11. Place of application	OPTIONAL
12. Financing of assistance and administrative costs	
	SUPPLEMENTATION
	B. STATE ASSISTANCE FOR "SPECIAL" NEEDS
1. Administration	County Social Service Board.
2. Special need circumstances	Most counties provide optional supplementation to aged, blind, and disabled SSI recipients but limit it to persons in licensed rest homes and licensed foster homes.2/
	C. MEDICAID ELIGIBILITY
1. Criterion	January 1972.
2. Determination by	State.

1/ For mandatory supplementation, compliance is by the method of maintaining all payment levels.
2/ Persons in these facilities and in title XIX facilities are allowed to keep $45 as a personal needs allowance.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

OHIO

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	House Bill 694.
2. Effective date	July 15, 1984.
3. Administration	Department of Human Services (State-administered through local county welfare offices).
4. Passalong	In compliance by the method of maintaining all payment levels.
5. Scope of coverage	Optional State supplement provided to aged, blind, and disabled residents of adult family homes approved by the county Human Services Department, group homes licensed by the Ohio Department of Human Services, and rest homes licensed by the Ohio Department of Health. Eligibility is also extended to persons who are not SSI recipients. Blind and disabled children under age 18 are not eligible for supplementation.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	None.
8. Payment levels	See table below.
9. Income disregards	Non-SSI recipients: Federal SSI disregards apply. SSI recipients: SSI cost-of-living increases after July 15, 1982 are disregarded. No other income disregards apply.
10. Resource limitations	Countable resources may not exceed $1,500 for an individual and $2,250 for a couple. The following resources are excluded: household goods; personal effects; one automobile either specially equipped for a disabled person, used for employment, or that has an equity value not exceeding $1,200 (excess above $1,200 is a countable resource); one burial plot; irrevocable burial contracts (revocable burial contracts are not excluded); life insurance policies with a total face value of $1,500 or less (if more, the cash surrender value is a countable resource).
11. Place of application	County Departments of Human Services.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: State funds.

8. Payment levels

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
	Adult family home: 1/				
	Aged, blind, and disabled	$450.00	$900.00	$125.00	$412.00
	Group home: 1/				
	Aged, blind, and disabled	550.00	1,100.00	225.00	612.00
	Rest home: 1/				
	Aged, blind, and disabled	550.00	1,100.00	225.00	612.00

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	OHIO
	B. STATE ASSISTANCE FOR "SPECIAL" NEEDS
1. Administration----------	STATE DOES NOT PROVIDE ASSISTANCE FOR "SPECIAL" NEEDS
2. Special need circumstances----------	
	C. MEDICAID ELIGIBILITY
1. Criterion----------	January 1972.
2. Determination by----------	State.

1/ Includes a $50 personal needs allowance.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

OKLAHOMA

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment----------	Article XXV of the Constitution of the State of Oklahoma.
2. Effective date----------	January 1, 1974.
3. Administration----------	Department of Human Services (administered through county offices of State agency). 1/
4. Passalong----------	In compliance by the method of total expenditures.
5. Scope of coverage----------	Optional supplement provided to needy aged, blind, and disabled individuals including such persons in licensed public and private medical institutions. Persons in institutions for tuberculosis and mental diseases are ineligible for supplements. Blind and disabled children age 18 years and over are eligible for supplementation.
6. Recoveries, liens, and assignments----	None.
7. Relative responsibility----------	None.
8. Payment levels----------	See table below.
9. Income disregards----------	Benefits from programs with Federal funding disregarded as income.
10. Resource limitations----------	Excluded are: (1) a home which is not producing income; (2) the value of essential household equipment; (3) the value of original Indian allotments, land purchased from allotment proceeds, and land purchased from funds granted the Indian in lieu of original allotment, provided the land is held in trust for the Indian and is held by the original allotee; (4) the face value of life insurance policies up to $1,100 per person, or prepaid funeral contracts when recipient has signed an irrevocable contract. A maximum reserve is established which indicates the largest equity a recipient can hold in one or more nonexcluded resources, in addition to his home, and still be considered in need: - Eligible individual - $1,600 - Man and wife - $2,400 When a client holds total resources which exceed the allowance reserve, the client is not considered to be in need. State law provides as a condition of eligibility that a person may not make assignment, transfer, or encumber property to render himself eligible for assistance at any time within 5 years preceding the filing of an application for assistance.

8. Payment levels

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
	Living independently:				
	Aged, blind, and disabled	$385.00	$608.00	2/$60.00	2/$120.00
	Living in the household of another:				
	Aged, blind, and disabled	276.67	445.34	2/ 60.00	2/ 120.00
	Title XIX facility: 3/				
	Aged, blind, and disabled	55.00	110.00	30.00	60.00

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	OKLAHOMA
A. OPTIONAL STATE SUPPLEMENTATION	
11. Place of application	County offices, Department of Human Services, or physician's office.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: State funds.
B. STATE ASSISTANCE for "SPECIAL" NEEDS	
1. Administration	Department of Human Services (administered through county offices of State agency).
2. Special need circumstances:	
a. Emergency circumstances	State funded General Assistance Program provides a maximum payment of one or two $35 warrants for an emergency need for utilities, shelter, food, or medicine.
C. MEDICAID ELIGIBILITY	
1. Criterion	January 1972.
2. Determination by	State.

1/ State supplementation program known as old age assistance, aid to the blind, and aid to the totally and permanently disabled (State AABD).

2/ Applies to persons with no income other than SSI. The maximum supplementation for those with other income is $40 per individual and $80 per couple.

3/ Represents maximum allowance; lesser amounts may be paid depending on need. Only persons with income of $55 or less per month are eligible for this supplement.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

OREGON

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	Oregon Revised Statutes 411.120.
2. Effective date	January 1, 1974.
3. Administration	Department of Human Resources, Adult and Family Services Division (State-administered in local offices).
4. Passalong	In compliance by the method of maintaining all payment levels.
5. Scope of coverage	Optional State supplement provided to every aged, blind, and disabled person living independently with or without an ineligible spouse or essential person or living in the household of another, in adult foster or residential care, or in board and room. Blind children are eligible and disabled children are ineligible for State supplementation. Disabled recipients whose earnings exceed the level set for substantial gainful activity but who receive special monthly benefits under Section 1619(a) of the Social Security Act continue to be eligible for State supplementation.
6. Recoveries, liens, and assignments	Assistance paid constitutes an unsecured prior claim against property or any interest therein belonging to the estate of a recipient except such portion as is being occupied as a home by the spouse, minor dependent child, or parent of deceased recipient. Adult and Family Services Division may compromise claim by accepting other security, or may waive payment when enforcement would be inequitable and would tend to defeat purpose of public assistnce law.
7. Relative responsibility	None.
8. Payment levels	

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
	Living independently:				
	Aged and disabled	$326.70	$488.00	$ 1.70	—
	Blind	351.70	513.60	26.70	25.60
	Living with an ineligible spouse:				
	Aged and disabled	408.70	N/A	83.70	N/A
	Blind	439.70	N/A	114.70	N/A
	Living with essential person:				
	Blind	513.60	N/A	25.60	N/A
	Living in household of another:				
	Aged and disabled	218.37	325.34	1.70	—
	Blind	243.37	350.94	26.70	25.60

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	OREGON
A. OPTIONAL STATE SUPPLEMENTATION	
8. Payment levels (Con.)	Code: Living Arrangements — Combined Federal/State: Individual / Couple — State supplementation: Individual / Couple Adult foster/residential care: 1/2/ Aged and disabled: $326.70 / $653.40 — $1.70 / $165.40 Blind: 351.70 / 703.40 — 26.70 / 215.40 Room and board: 1/ Aged and disabled: 326.70 / 653.40 — 1.70 / 165.40 Blind: 351.70 / 703.40 — 26.70 / 215.40
9. Income disregards	SSI eligibles: Federal SSI disregards apply to earned income. SSI ineligibles: For the aged and disabled, $65 per month of earned income and $7.50 per month of unearned income; for the blind, $85 per month of earned income and $11.50 of unearned income plus income needed for work expenses to achieve an approved self-support plan.
10. Resource limitations	Recipients under former State assistance programs may own the following: A home and all its contiguous property; income-producing property that provides partial support or may result in recipient's rehabilitation (excess property must be listed for sale); cash surrender value insurance of $1,000 per person; liquid assets (including cash, bank accounts, stocks and bonds, additional cash surrender value of insurance) up to a total of $500 for one personand $1,000 for an assistance unit; personal and household effects such as household furnishings and equipment, clothing, heirlooms, and keepsakes; one automobile in operating condition; burial plot, income-producing sales contracts; principal of conditional loan or fixed assets purchased with the loan. Has not transferred real property within 3 years prior to application or during receipt of assistance to qualify for assistance, avoid reimbursement, or defeat claim against estate. New recipients: Federal SSI limitations apply except that the transfer of a home may render a person ineligible for a State supplement for 24 months or more, based on the amount of uncompensated value.
11. Place of application	Local offices of Adult and Family Services Division or Senior Services Division.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: State funds.
B. STATE ASSISTANCE FOR "SPECIAL" NEEDS	
1. Administration	Department of Human Resources, Adult and Family Services Division or Senior Services Division.
2. Special need circumstances:	
a. Clothing for employment	Essential clothing may be provided for a recipient to begin employment--the recipient must have been accepted for a job.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	OREGON B. STATE ASSISTANCE FOR "SPECIAL" NEEDS
b. Corrective shoes	Necessary corrective, orthopedic or extra-sturdy shoes recommended by the recipient's physician.
c. Special diet	A recipient whose need for a special diet has been established by a physician will be allowed if the recipient maintains housekeeping quarters and is receiving a standard food allowance.
d. Restaurant meals	Restaurant meals are allowed in addition to the standard supplemental payments when recipient is unable to prepare meals because of physical and mental disability.
e. Home delivered meals 3/	Payment for home delivered meals may be provided when other plans do not appear feasible and (a) the recipient is unable to shop for food or unable to cook; or (b) the recipient requires a special diet and lacks sufficient knowledge to prepare it; or (c) the recipient is without proper cooking facilities and finds its physically impractical to use restaurant facilities.
f. Laundry allowances	Laundry allowances are provided only when the recipient is so disabled that he or she cannot do his or her own laundry and there is no other person living in the home who can do it, or when the recipient has no available laundry facilities of any kind.
g. Telephone allowances	Telephone allowances may be provided when (a) the recipient lives alone and is housebound; (b) the recipient lives in a situation so remote that a telephone is essential; and (c) a telephone is essential to maintain a job.
h. Food for guide dogs	Payment for food for guide dogs will be made for dogs provided to the recipient by the Oregon Commission for the Blind.
i. Housekeeper/homemaker services 3/	Housekeeper/homemaker services are defined as home management, maintenance and chore services, and personal-care services that must be purchased by the recipient to be able to remain in his or her own home. Maximum payment for housekeeper and/or homemaker services should not exceed the amount determined for the level of care required by the recipient.
j. Moving costs	Moving costs will be provided if it is essential to provide nonharzardous housing for the recipient or if the recipient has been evicted for reasons not attributable to his or her neglect or his or her failure to pay rent or house payments.
k. Household equipment costs	Certain items of household equipment may be purchased or repaired if the recipient is unable to obtain them without cost; a one-time payment of chattel mortgages or sales contracts may be made to prevent repossession if the cost of replacing an essential item exceeds the balance due on the contract.
l. Shelter exceptions	Additional payment for shelter expenses may be made in situations where the recipient has special needs which make it impractical or impossible to rent or continue to purchase adequate housing with current benefit payment.
m. Transportation expenses	Certain transportation expenses may be provided to meet specific needs of recipients.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	C. MEDICAID ELIGIBILITY	OREGON
1. Criterion	Title XVI.	
2. Determination by	State.	

1/ Additional costs covered by special service funds.
2/ Persons with other sources of income are allowed to keep $40 as a personal needs allowance.
3/ Vendor payments.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

PENNSYLVANIA

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	Article IV, Section 432(2), Pennsylvania Public Welfare Code.
2. Effective date	January 1, 1974.
3. Administration	Social Security Administration and State Department of Public Welfare. 1/
4. Passalong	In compliance by the method of maintaining all payment levels.
5. Scope of coverage	Optional supplement provided to aged, blind, and disabled persons who receive SSI payments or would receive them but for excess income. Persons residing in public institutions or in certified medical facilities where title XIX is paying more than 50 percent of the cost of care are not eligible for supplementation. Blind and disabled children are eligible for optional supplementation, except for domiciliary care where they must be age 18 or over. Disabled recipients whose earnings exceed the level set for substantial gainful activity but who receive special monthly benefits under Section 1619(a) of the Social Security Act continue to be eligible for State supplementation.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	None.

8. Payment levels

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
A	Living alone: Aged, blind, and disabled	$357.40	$536.70	$32.40	$48.70
B	Living in household of another: Aged, blind, and disabled	249.07	374.04	32.40	48.70
C	Living with an essential person: 2/ Aged, blind, and disabled	536.70	724.06	48.70	73.06
D	Living with an essential person in household of another: 2/ Aged, blind, and disabled	374.04	507.06	48.70	73.05
G	Living in domicilary-care facility or personal care boarding home: Aged, blind, and disabled	472.30	861.40	147.30	373.40

9. Income disregards	Federal SSI income disregards apply.
10. Resource limitations	Federal SSI resource limitations apply.
11. Place of application	Social Security Administration District Offices.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	PENNSYLVANIA
A. OPTIONAL STATE SUPPLEMENTATION	
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: Federal funds.
B. STATE ASSISTANCE FOR "SPECIAL" NEEDS	
1. Administration	Department of Public Welfare.
2. Special need circumstances:	
a. Burial expenses	Up to $350 in absence of other resources to meet payment.
b. Moving expenses	If moving required because of eviction or for health and welfare reasons, actual moving costs paid.
C. MEDICAID ELIGIBILITY	
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

1/ State makes determination of eligibility for domiciliary-care and personal care boarding home supplement; Social Security administers the payment.

2/ Applies only to cases transferred from former State assistance programs with "grandfather" essential persons.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

RHODE ISLAND

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	Title 40, Chapter 6, Section 6, General Laws of Rhode Island, 1956, as amended.
2. Effective date	January 1, 1974.
3. Administration	Social Security Administration and Department of Social and Rehabilitative Services. 1/
4. Passalong	In compliance by the method of total expenditures.
5. Scope of coverage	Optional State supplement provided to SSI recipients living independently, living in the household of another, or living in a title XIX facility. Blind and disabled children are eligible for State supplementation. Disabled recipients whose earnings exceed the level set for substantial gainful activity but who receive special monthly benefits under Section 1619(a) of the Social Security Act continue to be eligible for State supplementation.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	Parents for children under 18, husbands for wives, and generally wives for husbands. 2/
8. Payment levels	See table below.
9. Income disregards	Federal SSI income disregards apply.
10. Resource limitations	Federal SSI resource limitations apply.
11. Place of application	Social Security Administration District Offices.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: Federal funds.

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
A	Living alone: Aged, blind, and disabled	$378.80	$589.74	$53.80	$101.74
B	Living in household of another: Aged, blind, and disabled	279.65	440.57	62.98	115.23
	Title XIX facility: 1/ Aged, blind, and disabled	30.00	60.00	5.00	10.00

	B. STATE ASSISTANCE FOR "SPECIAL" NEEDS
1. Administration	Department of Social and Rehabilitative Services.
2. Special need circumstances:	
a. Moving	The cost of moving within cost guidelines is provided for recipients of SSI when move is determined to be socially desirable and when moving cannot be provided by city, town, or other community resources.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	RHODE ISLAND
B. STATE ASSISTANCE FOR "SPECIAL" NEEDS	
2. Special need circumstances (con.):	
b. Emergency needs under catastrophic conditions	In the event of a catastrophe by fire, flood, lightning, or severe wind, the State will provide shelter, clothing, food, and essential household equipment and furnishings.
c. Burial	The cost of burial expenses can be provided for any person who dies leaving insufficient resources to meet this expense.
d. Heat/utility terminations	Assistance under specified conditions for the purposes of preventing fuel and/or utility terminations.
e. Homemaker services	Services provided under specified criteria to prevent institutionalization of a recipient who is unable to perform homemaker duties due to an acute or chronic illness.
C. MEDICAID ELIGIBILITY	
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

1/ State administers payment to SSI recipients in title XIX facilities.
2/ Applies only to State assistance for special needs.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	SOUTH CAROLINA
A. OPTIONAL STATE SUPPLEMENTATION	
1. Statutory basis for payment	1952 Code 71-130, 1947(45) 489; State Appropriation Act.
2. Effective date	July 1, 1974.
3. Administration	Department of Social Services. (State supervised, county-administered).
4. Passalong	In compliance by the method of total expenditures.
5. Scope of coverage	Optional State supplement provided to SSI recipients and other low income individuals who meet the State's net income limitation and live in residential-care facilities. Blind and disabled children are not eligible for optional supplementation.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	None.
8. Payment levels	See table below.
9. Income disregards	Federal SSI income disregards apply.
10. Resource limitations	Federal SSI resource limitations apply.
11. Place of application	County offices of Department of Social Services.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: State funds.

Code	Living Arrangements	Combined Federal/State Individual	Combined Federal/State Couple	State supplementation Individual	State supplementation Couple
	Licensed residential-care facility: 1/				
	Aged, blind, and disabled	$455.00	$910.00	$130.00	$422.00

B. STATE ASSISTANCE FOR "SPECIAL" NEEDS	
1. Administration	STATE DOES NOT PROVIDE ASSISTANCE FOR "SPECIAL" NEEDS
2. Special need circumstances	
C. MEDICAID ELIGIBILITY	
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

1/ Represents maximum amount paid; lesser amounts may be paid based on need. Includes a $25 personal needs allowance.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

SOUTH DAKOTA

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment----------	South Dakota Common Law 28-5A-1.
2. Effective date----------	February 1, 1975.
3. Administration----------	Department of Social Services (State-administered in local offices for personal care and foster-care home arrangements; State-administered in State office for independent arrangements).
4. Passalong----------	In compliance by the method of maintaining all payment levels.
5. Scope of coverage----------	Optional State supplement provided to SSI recipients who live independently and have no other source of income or who have net incomes less than the supplementation levels and live in supervised personal-care facilities or in adult foster-care homes. Blind or disabled children meeting income and resource limitations, living in supervised personal-care facilities or adult foster-care homes are eligible for optional supplementation. Disabled recipients whose earnings exceed the level set for substantial gainful activity but who receive special monthly benefits under Section 1619(a) of the Social Security Act continue to be eligible for State supplementation.
6. Recoveries, liens, and assignments----	None.
7. Relative responsibility----------	None.
8. Payment levels----------	See table below.
9. Income disregards----------	State disregards $25 of the Federal SSI payment of recipients in personal-care facilities or foster-care.
10. Resource limitations----------	Federal SSI resource limitations apply.
11. Place of application----------	Local offices of State Department of Social Services for individuals in supervised personal-care facilities or in adult foster-care homes. No application is necessary for persons living independently with no other source of income.
12. Financing of assistance and administrative costs----------	Assistance: State funds. Administration: State funds.

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
	Living independently:				
	Aged, blind, and disabled	$340.00	$503.00	1/$15.00	1/$15.00
	Supervised personal-care facility: 2/				
	Aged, blind, and disabled	475.00	N/A	175.00	N/A
	Adult foster-care: 2/				
	Aged, blind, and disabled	390.30	N/A	90.30	N/A

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

SOUTH DAKOTA

DATA ELEMENT	B. STATE ASSISTANCE FOR "SPECIAL" NEEDS
1. Administration	STATE DOES NOT PROVIDE ASSISTANCE FOR "SPECIAL" NEEDS
2. Special need circumstances	
	C. MEDICAID ELIGIBILITY
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

1/ Limited to SSI recipients with no other source of income.
2/ Represents maximum amount paid, less amounts may be paid depending on cost of care in the facility. State provides an additional income disregard of $25 per month of the Federal SSI payment. The combined Federal and State amount excludes the disregard.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	TENNESSEE
	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	STATE HAS
2. Effective date	
3. Administration	
4. Passalong 1/	
5. Scope of coverage	NOT ELECTED
6. Recoveries, liens, and assignments	
7. Relative responsibility	
8. Payment levels	TO PROVIDE
9. Income disregards	
10. Resource limitations	OPTIONAL
11. Place of application	
12. Financing of assistance and administrative costs	SUPPLEMENTATION
	B. STATE ASSISTANCE FOR "SPECIAL" NEEDS
1. Administration	STATE DOES NOT PROVIDE ASSISTANCE FOR "SPECIAL" NEEDS
2. Special need circumstances	
	C. MEDICAID ELIGIBILITY
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

1/ For mandatory supplementation, compliance is by the method of maintaining all payment levels.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

TEXAS

DATA ELEMENT	
	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	STATE HAS
2. Effective date	
3. Administration	
4. Passalong	
5. Scope of coverage	NOT ELECTED
6. Recoveries, liens, and assignments	
7. Relative responsibility	TO PROVIDE
8. Payment levels	
9. Income disregards	
10. Resource limitations	OPTIONAL
11. Place of application	
12. Financing of assistance and administrative costs	SUPPLEMENTATION
	B. STATE ASSISTANCE FOR "SPECIAL" NEEDS
1. Administration	STATE DOES NOT PROVIDE ASSISTANCE FOR "SPECIAL" NEEDS
2. Special need circumstances	
	C. MEDICAID ELIGIBILITY
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

UTAH

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	Appropriation Act for the Department of Social Services, 1978/79.
2. Effective date	July 1, 1978.
3. Administration	Department of Social Services, Assistance Payments Administration.
4. Passalong	In compliance by the method of maintaining all payment levels.
5. Scope of coverage	Optional State supplement provided to SSI recipients who are Utah residents and are living independently or in the household of another. Supplementation is not provided to persons residing in a State institution or nursing home. Disabled recipients whose earnings exceed the level set for substantial gainful activity but who receive special monthly benefits under Section 1619(a) of the Social Security Act continue to be eligible for State supplementation.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	None.
8. Payment levels	See table below.
9. Income disregards	None.
10. Resource limitations	None.
11. Place of application	No application required. Payments are made based on information furnished Utah via State Data Exchange (SDX).
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: State funds.

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
	Living independently: Aged, blind, and disabled	$335.00	$508.00	$10.00	$20.00
	Living in household of another: Aged, blind, and disabled	226.67	345.34	10.00	20.00

	B. STATE ASSISTANCE FOR "SPECIAL" NEEDS
1. Administration	STATE DOES NOT PROVIDE ASSISTANCE FOR "SPECIAL" NEEDS
2. Special need circumstances	

	C. MEDICAID ELIGIBILITY
1. Criterion	January 1972.
2. Determination by	State.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

VERMONT

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment----------	Section 1, 33V S. a. paragraph 2651, Vermont Aid to Aged, Blind, and Disabled Statutes.
2. Effective date----------	January 1, 1974.
3. Administration----------	Social Security Administration.
4. Passalong----------	In compliance by the method of total expenditures.
5. Scope of coverage----------	Optional State supplement provided to every SSI eligible aged, blind, and disabled individual except those who are patients in medical facilities where title XIX pays more than 50 percent of the costs of care, and those who waive receipt of supplements. Blind and disabled children are eligible for optional supplementation. Disabled recilents whose earnings exceed the level set for substanital gainful activity but who receive special monthly benefits under Section 1619(a) of the Social Security Act continue to be eligible for State supplementation.
6. Recoveries, liens, and assignments----	None.
7. Relative responsibility----------	None.
8. Payment levels----------	See table below.

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
	Living independently: 1/ Aged, blind, and disabled				
A	Area 1	$378.00	$555.30	$53.00	$67.30
B	Area 2	378.00	584.50	53.00	96.50
E	Living in the household of another: Aged, blind, and disabled	251.97	370.14	35.30	44.80
F	Licensed custodial-care home with limited nursing care: Aged, blind, and disabled	513.60	911.50	188.60	423.50
G	Licensed custodial-care community home: Aged, blind, and disabled	483.80	885.20	158.80	397.20
H	Custodial-care family home: Aged, blind, and disabled	408.90	755.40	83.90	267.40

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

VERMONT

DATA ELEMENT	
	A. OPTIONAL STATE SUPPLEMENTATION
9. Income disregards	Federal SSI income disregards apply.
10. Resource limitations	Federal SSI resource limitations apply.
11. Place of application	Social Security Administration District Offices.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: Federal funds.
	B. STATE ASSISTANCE FOR "SPECIAL" NEEDS
1. Administration	Agency of Human Services, Department of Social Welfare.
2. Special need circumstances:	
a. State essential person program	State pays special needs supplement to individuals and couples living independently with an essential person and to individuals living in household of another with an ineligible spouse. Supplementation payment levels are:

	All categories	
	Area 1	Area 2
1. Living independently:		
Individual with essential person	$536	$563
Couple with essential person	679	707
2. Living in household of another:		
Individual with ineligible spouse	364	364

b. Emergency assistance	Emergency assistance is provided under certain conditions for the following: in case of court-order eviction or natural disaster, e.g., fire, flood, or hurricane; emergency medical care; funeral costs; and emergency fuel needs.
	C. MEDICAID ELIGIBILITY
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

1/ Area 1 includes all counties except Chittenden. Area 2 includes only Chittenden County (Burlington).

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

VIRGINIA

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	Code of Virginia 63.1-78.1, 63.1-25.1 1/
2. Effective date	July 1, 1974.
3. Administration	Department of Social Services, Department of Visually Handicapped (State-supervised local administration).
4. Passalong	In compliance by the method of total expenditures.
5. Scope of coverage	Optional State supplement provided to needy aged, blind, and disabled persons who live in licensed homes for the aged or in domiciliary institutions and who are eligible for SSI benefits or who would be eligible except for excess income. Blind and disabled children are ineligible for optional supplementation. Disabled recipients whose earnings exceed the level set for substantial gainful activity but who receive special monthly benefits under Section 1619(a) of the Social Security Act continue to be eligible for State supplementation.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	Income and resources of an ineligible spouse are considered available to the other spouse.
8. Payment levels	See table below.
9. Income disregards	SSI disregards apply. When applicable, a disregard for income allotted to the support of children and/or spouse at home is also allowed.
10. Resource limitations	Federal SSI resource limitations apply.
11. Place of application	Local offices of State Department of Social Services.
12. Financing of assistance and administrative costs	Assistance: 62.5 percent State funds; 37.5 percent local funds. Administration: 80 percent State funds; 20 percent local funds.

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
	Licensed home for the aged or domiciliary institution: 2/				
	Aged, blind, and disabled	$510.00	$1,020.00	$185.00	$532.00
	Adult family care: 3/				
	Aged, blind, and disabled	411.00	822.00	86.00	334.00

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

VIRGINIA

DATA ELEMENT	B. STATE ASSISTANCE FOR "SPECIAL" NEEDS
1. Administration----------	STATE DOES NOT PROVIDE ASSISTANCE FOR "SPECIAL" NEEDS
2. Special need circumstances----------	
	C. MEDICAID ELIGIBILITY
1. Criterion----------	January 1972.
2. Determination by----------	State.

1/ State supplementation program known as "Auxiliary Grants Program."
2/ Represents the maximum allowance; lower amounts may be paid depending on the cost of the facility. Includes a personal needs allowance of $30.
3/ Pilot project in certain counties, effective August 1982.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

WASHINGTON

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	Revised Code of Washington (RCW) 74.04.600 and Washington Administrative Code (WAC) 388-59.
2. Effective date	January 1, 1974.
3. Administration	Social Security Administration and Department of Social and Health Services.1/
4. Passalong	In compliance by the method of maintaining all payment levels.
5. Scope of coverage	Optional State supplement provided to needy aged, blind, and disabled persons except to (1) individuals converted from former State assistance programs who have more than one essential person; (2) eligible couples with one or more essential persons; (3) residents of medical facilities; and (4) residents of public emergency shelters for the homeless. Blind and disabled children are eligible for optional supplementation.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	None.
8. Payment levels	See table below.

Code	Living Arrangements	Combined Federal/State Individual	Combined Federal/State Couple	State supplementation Individual	State supplementation Couple
A	Living independently: 2/3/ Aged, blind, and disabled				
	Area 1	$363.30	$525.40	$38.30	$37.40
	Area 2	342.85	495.45	17.85	7.45
B	Living with ineligible spouse: 3/ Aged, blind, and disabled				
	Area 1	525.40	N/A	200.40	N/A
	Area 2	495.45	N/A	170.45	N/A
B	Living with one essential person: 3/4/ Aged, blind, and disabled				
	Area 1	525.40	N/A	37.40	N/A
	Area 2	495.45	N/A	7.45	N/A
C	Living in household of another: Aged, blind, and disabled	229.35	341.91	12.68	16.57
F	Living in household of another with ineligible spouse: Aged, blind, and disabled	341.91	N/A	125.24	N/A
F	Living in household of another with one essential person: 4/ Aged, blind, and disabled	341.91	N/A	16.57	N/A
	Title XIX facility: 1/	35.55	71.10	10.55	21.10

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

WASHINGTON

DATA ELEMENT	
	A. OPTIONAL STATE SUPPLEMENTATION
9. Income disregards	Federal SSI income disregards apply.
10. Resource limitations	Federal SSI resource limitations apply.
11. Place of application	Social Security Administration District Offices.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: Federal funds.
	B. STATE ASSISTANCE FOR "SPECIAL" NEEDS
1. Administration	Department of Social and Health Services, Community Services Division.
2. Special need circumstances:	
a. Seeing-eye dog	Food for seeing-eye dog at the rate of $32.00 per month.
b. Other utility charges	Telephone - amount varies according to need and location. Laundromat - $9.00 per month.
c. Meals	Emergency restaurant meals - $5.35 per day (rounded to the nearest dollar). Restaurant meals - $163.00 per month. Home delivered meals - established cost standard by local social services staff.
	C. MEDICAID ELIGIBILITY
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

1/ State administers payments to SSI recipients in title XIX facilities.
2/ Includes persons in congregate-care group living facilities. Costs of maintenance in such facilities is the standard payment amount minus $35.55 for personal allowance.
3/ Area 1 includes King, Kitsap, Pierce, Snohomish, and Thurston counties. Area 2 includes all other counties.
4/ Applies only to cases transferred from former State assistance programs with "grandfather" essential persons.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	WEST VIRGINIA
A. OPTIONAL STATE SUPPLEMENTATION	
1. Statutory basis for payment 2. Effective date 3. Administration 4. Passalong 5. Scope of coverage 6. Recoveries, liens, and assignments 7. Relative responsibility 8. Payment levels 9. Income disregards 10. Resource limitations 11. Place of application 12. Financing of assistance and administrative costs	STATE HAS NOT ELECTED TO PROVIDE OPTIONAL SUPPLEMENTATION ON A RECURRING BASIS
B. STATE ASSISTANCE FOR "SPECIAL" NEEDS 1/	
1. Administration	Department of Welfare.
2. Special need circumstances	
a. Adult family-care home	Payment of $270-$340 monthly (depending on amount of care required for each recipient) provided on behalf of every aged, blind, or disabled person living in adult family-care home who has been approved for SSI.
b. Personal-care home	Payment of $270-$340 monthly (depending on amount of care required for each resident) provided on behalf of every aged, blind, and disabled person living in a personal-care home who has been approved for SSI.
c. Chore services	Payment of $5-$110 monthly provided to aged, blind, and disabled persons who live in their own homes, or in some cases, in homes of others. The recipient must be one (a) who is unable to perform certain household tasks, (b) who without the performance of these household tasks by a chore service provider would be unable to remain in his own home, and (c) who has been approved for SSI.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

DATA ELEMENT	WEST VIRGINIA
	B. STATE ASSISTANCE FOR "SPECIAL" NEEDS 1/
2. Special need circumstances (Con.):	
d. Emergency financial assistance----	Amounts vary with need. Provided to aged, blind, and disabled persons who need (perhaps because of a disaster) short-term financial help. Emergency assistance not limited to those approved for SSI payment and may include payment of emergency needs such as shelter, food, clothing, etc. Payments may be made to individuals or families for up to 30 consecutive days in any 12-month period.
e. Burial expenses----------	Up to $650 provided for burial expenses for persons who do not possess sufficient resources to pay for burial expenses. (A contribution of up to $705 toward burial expenses from any source is excluded from consideration as a resource in determining assistance amount for burial expenses.)
	C. MEDICAID ELIGIBILITY
1. Criterion----------	Title XVI.
2. Determination by----------	Social Security Administration.

1/ Vendor payments.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

WISCONSIN

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	Wisconsin Statutes, 49.177.
2. Effective date	January 1, 1974.
3. Administration	Social Security Administration.
4. Passalong	In compliance by the method of total expenditures.
5. Scope of coverage	Optional State supplement provided to all eligible persons living 1) independently or in the household of another with or without a spouse or essential person; 2) in a private nonmedical facility where 50 percent or less of the cost of care is covered by title XIX or in a supportive living arrangement. Residents of emergency shelters or patients in medical facilities where title XIX pays more than 50 percent of the cost of care are not eligible for supplementation. Blind and disabled children are eligible for optional supplementation.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	None.
8. Payment levels	See table below.

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
A	Living independently: 1/ Aged, blind, and disabled	$424.70	$649.00	$99.70	$161.00
B	Living in household of another: Aged, blind, and disabled	316.37	486.34	99.70	161.00
C	Living independently with an ineligible spouse: Aged, blind, and disabled	474.40	N/A	149.40	N/A
D	In household of another with ineligible spouse: Aged, blind, and disabled	366.07	N/A	149.40	N/A
E	In private nonmedical group home or supportive living arrangement: Aged, blind, and disabled	522.20	991.80	197.20	503.80
F	Living independently with an essential person (nonspouse): 2/ Aged, blind, and disabled	587.70	812.00	99.70	161.00
G	In household of another with an essential person (nonspouse): 2/ Aged, blind, and disabled	425.04	595.01	99.70	161.00

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

WISCONSIN

DATA ELEMENT	
A. OPTIONAL STATE SUPPLEMENTATION	
8. Payment levels (Con.)	See table below
9. Income disregards	Federal SSI income disregards apply.
10. Resource limitations	Federal SSI resource limitations apply.
11. Place of application	Social Security Administration District Offices.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: Federal funds.
B. STATE ASSISTANCE FOR "SPECIAL" NEEDS	
1. Administration	Department of Health and Social Services.
2. Special need circumstances	State administers special need supplementary payments for developmentally disabled and chronically mentally ill to cover care in nonmedical facilities.
C. MEDICAID ELIGIBILITY	
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
H	Living independently with an ineligible spouse who is an essential person: 2/ Aged, blind, and disabled	637.40	N/A	149.40	N/A
I	In household of another with an ineligible spouse who is an essential person: 2/ Aged, blind, and disabled	474.74	N/A	149.40	N/A

1/ Includes individuals in private medical facilities who receive less than 50 percent of cost of care from title XIX benefits.
2/ Applies only to cases transferred from former State assistance programs with "grandfather" essential persons.

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

WYOMING

DATA ELEMENT	A. OPTIONAL STATE SUPPLEMENTATION
1. Statutory basis for payment	Wyoming Statute 42-1-131.
2. Effective date	July 1, 1977.
3. Administration	Department of Health and Social Services, Division of Public Assistance and Social Services (State-administered).
4. Passalong	In compliance by the method of maintaining all payment levels.
5. Scope of coverage	Optional State supplement of $20 provided to every aged, blind, and disabled person with no other income, living independently or in household of another. Blind and disabled children are eligible for optional supplementation program.
6. Recoveries, liens, and assignments	None.
7. Relative responsibility	None.
8. Payment levels 1/	See table below.
9. Income disregards	None.
10. Resource limitations	None.
11. Place of application	No application required. State uses computerized information from the Social Security Administration to identify eligible recipients.
12. Financing of assistance and administrative costs	Assistance: State funds. Administration: State funds.

Code	Living Arrangements	Combined Federal/State		State supplementation	
		Individual	Couple	Individual	Couple
	Living independently:				
	Aged, blind, and disabled	$345.00	$528.00	2/$20.00	2/$40.00
	Living in the household of another:				
	Aged, blind, and disabled	236.67	365.34	2/ 20.00	2/ 40.00

DATA ELEMENT	B. STATE ASSISTANCE FOR "SPECIAL" NEEDS
1. Administration	STATE DOES NOT PROVIDE ASSISTANCE FOR "SPECIAL" NEEDS
2. Special need circumstances	

OPTIONAL STATE SUPPLEMENTATION, OTHER STATE ASSISTANCE, AND MEDICAID ELIGIBILITY FOR SSI RECIPIENTS

JANUARY 1, 1985

WYOMING

	C. MEDICAID ELIGIBILITY
1. Criterion	Title XVI.
2. Determination by	Social Security Administration.

1/ Persons in title XIX facilities who have other sources of income are allowed to keep $30 per month as a personal needs allowance.
2/ For persons with less than $20.00 income.